附件：会议注册回执表

**The Second China - Germany Joint Conference on Palaeontology**

*between Palaeontological Society of China and Palaeontologische Gesellschaft*

October 10-13, 2017, Yichang of Hubei, China

**REGISTRATION FORM FOR CHINESE PARTICIPANTS**

**中文姓名：**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**英文姓名：FAMILY NAME** (last name): **FIRST NAME** (s):

**TITLE OR POSITION:**

**MALE** ( ) **FEMALE** ( ) （please mark with **√**）

**INSTITUTION**:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ADDRESS:**

**City:** **Post Code**  **Country:**

**E-mail:**  **Tel:**  **Mobil**

* **I plan to register as (Please select and mark with √ ):**

(1) Formal Participant (2000 Yuan RMB) ( ) ;

(2) Student participant (1500 Yuan RMB) ( )

* **I am interested in giving a:**
* Oral presentation with full title, session number preferred（select from S1-S23）:

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🞏 Poster presentation with full title, session preferred（select from S1-S23）:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

* I am interested in participating field trip(s), number ( or/and )（select from F1 to F7）.

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Other suggestion(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date and Signature

**Pleases send this form before June 30, 2017 by email attachment to:**

Dr. Jiang Qing (蒋青)/Mr TANG Yugang (唐玉刚)

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