



REGISTRATION FORM

To be sent to: sif@sif.it

SOCIETÀ ITALIANA DI FISICA

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Closing date for registration: 12 December 2022

No participation fee is required

Title: Prof. Dr. other:

Name: _____

Surname: _____

Date of birth: _____

Nationality: _____

Organization: _____

Address: _____

Zip Code: _____ City: _____

Country: _____

Phone (+ international dialing code): _____

Mobile: _____

e-mail: _____

Accompanying person: _____

Date: _____ Signature: _____