



Registration GOOD Meeting 2020 Karlsruhe

Name (surname, name):

Address (street, postcode, city, country):

email address:

DMG student member (yes, no):

participation (oral, poster, registration only):

title of presentation:

I would like to join the icebreaker (yes, no):

I would like to attend the fieldtrip – not included in the conference fee (yes, no):

Please send your completed form goodmeeting5th@gmail.com