**PRE-REGISTRATION FORM**

**Conference ICRM-2023: March 27-31, 2023, Bucharest, Romania**

First name and Surname: …………………………………………………………….

Affilliation:…………………………………………………………………………. ……………………………………………………………………………………….

Address:……………………………………………………………………………..

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……………………………………………………………………………………….

Phone: …………………………………………………………………

E-mail: ………………………………………………………………..

I intend to participate to the ICRM-2023 Conference: Yes / No

I will come: Alone or Accompanied by: one person or ….. persons

I intend to submit an Abstract of a paper for the ICRM-2023 Conference: Yes / No

If Yes:

1. The preliminary title of the paper is: …………………………………………….. ………………………………………………………………………………………………………………………………………………………………………………
2. Name of the conference session for which the paper will be proposed: …………..

………………………………………………………………………………………

1. Proposed form of presentation: Oral / Short Oral / Poster

Date: ……………………..