ICRPS SUMMER INSTITUTE 2017 REGISTRATION FORM

Barcelona, Spain: June 25- July 8, 2017

STUDENT REGISTRATION FORM

) Persona	il Information and Contact	t Details		
First N	Name			
Last N	lame			
Unive	rsity/Department			
Male/l	Female			
Nation	nality			
Count	ry of Residence			
Street	Address			
City/T	Town			
Postal	Code			
Count	ry			
Telepl	none Number			
Email				
includes udent res ooms inc elow is th Billing a e billing	sidence in Bellaterra), all lude two twin beds and a ne link for the student res nddress (This is the addr	on in double meals, field washroom sidence: <u>htt</u> ess that wil	e room at the Vila Universite d trips and support materia	<i>ls.</i> <u>t/en/</u> ease, fill in i
epartmen	t:			
.uu ess: tv	State:	7.in·	Country	
ax Identifi	ication Number or NIF:	<i>L</i> ipi		
mail:				
ontact per	son and telephone numbe	r:		

4) Method of payment

Bank transfer headed to:

• Bank name: BBVA

• Bank address:

Plaça Civica, Campus UAB, 08193 Cerdanyola del Valles, Barcelona (Spain)

• Account name: UNIVERSITAT AUTONOMA DE BARCELONA

• **IBAN number:** ES2801826035450201614998

• **Swift code:** BBVAESMMXXX

All Bank Transaction costs are in charge of applicants

PLEASE SPECIFY IN THE PAYMENT: ICRPS2017 and your NAME

Please, attach a copy of the bank transfer to this registration form and send both of them by e-mail to:

E-mail: lourdes.viladomiu@uab.es with CC to d.econ.aplicada@uab.cat