

**REGISTRATION FORM**

Title	<b>„MULTILINGUAL FAMILIES – A LINGUISTIC TREASURE FOR EUROPE”</b>
Organizer	<b>Spółeczna Akademia Nauk (University of Social Sciences)</b>
Place	POLAND, LODZ, ul. Kilińskiego 98, Conference room of University of Social Sciences

**I hereby confirm my participation in the above conference free-of-charge  
on 5th NOV2014, from 10:00-15:00.**

Name:	Telephone:
Name of the institution:	Fax:
Contact address:	E-mail:

If you have any further questions or want to sign out,  
please contact the project office: tel. +48 42 6642278; szkolenia-dpf@spoleczna.pl

I hereby give consent for my personal image to be processed by the University of Social Sciences for promotional purposes of the  
aforementioned project (e.g. a workshop photo in the articles on the project implementation and on the project's website).

Signature
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***Fill in with printed letters, sign the application and send the scan of the document to:***  
**[szkolenia-dpf@spoleczna.pl](mailto:szkolenia-dpf@spoleczna.pl)**

***Number of participants limited – FIRST COME FIRST SERVE BASIS.***  
Your application confirmation will be sent to the e-mail address indicated.

