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**Registration Form**

(Please complete this form and return it to [bgurenci@baskent.edu.tr](mailto:bgurenci@baskent.edu.tr) by **15 April 2015** as a Word attachment)

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| **Surname** |  |
| **Name** |  |
| **Department and Institution** |  |
| **Title** |  |
| **Are you a graduate student?** | Yes No |
| **Contact Address** |  |
| **E-mail** |  |
| **Phone** |  |
| **Fax** |  |
| **Will you be presenting a paper?** | Yes No  (If Yes, please write the title of your paper in the space provided below)  …………………………………………………………. |
| **Would you like to chair a session?** | Yes No |
| **Do you require any technical equipment for your presentation?** | Yes No  (If Yes, please specify)  …………………………………………………………. |