



## REGISTRATION FORM

I register for the 3<sup>rd</sup> European Intensive Programme "Mountain Forests for Protection and Protection" by sending a deposit of 70 € (EURO) to the following account at

**ERSTE Bank**

**Gersthofer Strasse 20-22**

**1180 Wien**

**account number: 049-54327**

bank code: 20111

account holder (name of the account): INSTITUT F WILDBIOLOGIE VK IPMF

(all bank charges need to be payed by the participant!)

and by faxing this form to the following address:

Institute for Wildlife Biology and Game Management  
University for Agricultural Sciences, Vienna  
C/o Mark Wöss  
Peter-Jordan Strasse 76  
A-1190 Vienna  
**Fax nr. +43-1-47654/4459**

### PERSONAL DATA

Family Name:

First Name:

Academic Titles:

Date of Birth:

Sex:

female

male

Nationality:

*Home Address:*

Street, Number:

Postal Code:

Country:

e-mail:

Town:

Telephone:

Fax:

*Address (to send information)*

Street, Number:

Postal Code:

Country:

e-mail:

Town:

Telephone:

Fax:

*Academic Career:*

Date of school-leaving exam:

*University/ies attended:*

Name:

Location:

Discipline/s studied:

Year of study:

Date of graduation:

Name:

Location:

Discipline/s studied:

Year of study:

Date of graduation:

*English Language Competence:*

excellent

good

sufficient

*Eating habits:*

Vegetarian

Non Vegetarian

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