Participation Intent Form to the 21ISGdR2023

Please fill out this form and send it to isgdr2023@tongji.edu.cn.

|  |  |  |  |
| --- | --- | --- | --- |
| Name: | First name | Middle name | Family name |
| Title: | Mr. / Ms. / Dr. / Prof. | | |
| Affiliation: |  | | |
| Address: |  | | |
| Phone Number: |  | | |
| E-mail: |  | | |
| Oral Presentation: | Yes / No | | |
| Submission Document Type | Abstract / Full Paper | | |
| Participation to Field Trip: | Yes / No | | |
| Registration Type: | ICGdR Member / Non-Member / Student | | |
| Accompanying person: | (If YES, please write Name and Registration Type.)  ICGdR Member / Non-Member / Student | | |