

→ Attn: Dr. Thomas Roth-Berghofer

Registration Form

Yes, I will participate in the First Workshop on Philosophy and Informatics.

Title: _____

First Name: _____

Name: _____

Street: _____

City: _____

Country: _____

Telephone: _____

Fax: _____

e-mail: _____

Workshop fee: **55 Euro**

Yes, I will pay cash on-site.

Remarks: _____

Date

Signature

[Please, send the filled out form to DFKI, Fax: +49 (0)631 205-3472]