



10th Iranian Statistical Conference
August 3-5, 2010
University of Tabriz, Tabriz, Iran



Registration Form

Gender: Male Female

Title:

First name:

Family name:

Institute/ Organization:

Affiliation:

Address:

Postal Code:

City:

Country:

Telephone:

Fax:

E-mail:

I am a: (please tick if applicable) Member of the Iranian Statistical Society Student

Would you like to present a paper: Yes No

Title of contributed paper:

Coauthors (if any):

First name:

Family name:

Title:

1.

2.

3.

Topic code of your contributed paper:

Mode of presentation that you prefer: Oral Presentation

Poster

Equipment required:

PC with LCD Projector

Overhead Projector

whiteboard

Would you like to present a workshop? Yes No

If yes, please specify the topic

Time required for workshop hours

Date:

Signature