

REGISTRATION FORM

5th Conference on Technologies of Knowledge Exploration and Representation

September 15-18, 2010

Hołny Mejera, Poland

Name (with degree):

Organisation:

Address:

Phone: E-mail:

Paper submission: Yes/No

Title of paper:

.....

Coauthors:

.....

Equipment needs (data projector w/laptop, overhead projector, others):

.....

Participation in trip: Yes/No

Comments:

.....

Date: