

REGISTRATION FORM

**International Conference on Microbial Biotechnology – 4th edition**

***Chisinau 2018, October 11-12***

The completed registration form should be sent to the Secretariat (only by e –mail).

|  |  |
| --- | --- |
| Author'(s) Name(s), Surname(s) |  |
| Speaker'(s) Name(s), Surname(s) |  |
| Place of work (study) |  |
| Position |  |
| Scientific degree |  |
| Post address |  |
| Tel, fax |  |
| E-mail |  |
| Title of article |  |
| Section |  |
| Participation (correspondence/ personally participating) |  |
| Do you need accommodation?(Yes/No) |  |

CONTACTS:

Institute of Microbiology and Biotechnology 1, Academiei str., MD 2028, Chisinau, Moldova

Phone/Fax: +373 22 725754

Email: [imbconference2018@gmail.com](mailto:imbconference2018@gmail.com%20)

Website: [www.imb.asm.md](http://www.imb.asm.md)