

**IV International Conference**

**“Mongolia and the Mongols: Past and Present”**

Poland, Warsaw, October 16-17, 2023

**REGISTRATION FORM**

**Please complete the form in BLOCK LETTERS. Save it as MS Word file (lastname.doc or lastname.docx).**

**Send the completed form to:** [**mongoliaandthemongols\_2020@uw.edu.pl**](mailto:mongoliaandthemongols_2020@uw.edu.pl)

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| **PERSONAL INFORMATION** | | | | | | | | | |
| **Title:** | **Name:** | | | | | **Family name (ovog):** | | | |
| **E-mail address:** | | | | | | | | | |
| **VISA REQUEST** | | | | | | | | | |
| **Do you need a formal invitation to apply for a Polish visa?** | | | **YES**  (**PLEASE SEND US SCAN OF YOUR PASSPORT’S FRONT PAGE AS SOON AS POSSIBLE**) | | | | | | **NO** |
| **INSTITUTIONAL INFORMATION (affiliation)** | | | | | | | | | |
| **Position:** | | | | | | | | | |
| **Full name of the institution:** | | | | | | | | | |
| **Address of the institution:** | | | | | | | | | |
| **PRESENTATION** | | | | | | | | | |
| **Title of presentation:** | | | | | | | | | |
| **Language of presentation:  English  Mongolian** | | | | | **Did you submit your abstract?  YES  NO** | | | | |
| **ACCOMMODATION** | | | | | | | | | |
| **Date of arrival:** | | | | | **Date of departure:** | | | | |
| **Means of transport:  PLANE  TRAIN  CAR** | | | | | | | | | |
| **NOTICE:** THE ORGANIZERS MAY PROVIDE THE PARTICIPANTS WITH A LIST OF RECOMMENDED HOTELS ON REQUEST BY E-MAIL. | | | | | | | | | |
| **FORM OF PAYMENT** | | | | | | | | | |
| **BY TRANSFER TO THE UNIVERSITY BANK ACCOUNT** | | | | IN **CASH** **UPON YOUR ARRIVAL** | | | | | |
| YOU SHALL SEND **650 PLN**  TO THE BANK ACCOUNT **PL 10 1160 2202 0000 0000 4989 5290**  BIG/SWIFT: **BIGBPLPW**  Address of the receipient: UNIVERSITY OF WARSAW, ADDRESS: KRAKOWSKIE PRZEDMIESCIE 26/28, 00-927 WARSAW, POLAND  BANK ADDRESS: Bank Millennium S.A. o/Warszawa, ul. Stanisława Żaryna 2a, 02-593 Warszawa  PLEASE ADD YOUR **FULL NAME** AND CONFERENCE SHORT NAME: **MONGOLIA\_2020** | | | | | | | | | |
| **INVOICE INFORMATION** | | | | | | | | | |
| **INVOICE REQUEST (please mark)** | | **YES** | | | | | | **NO** | |
| **Institution/Name:** | | | | | | | | | |
| **Address:** | | | | | | | | | |
| **Post code:** | | **City:** | | | | | **Country:** | | |
| I HEREBY GIVE CONSENT FOR MY PERSONAL DATA INCLUDED IN MY APPLICATION TO BE PROCESSED FOR THE PURPOSES OF THE REGISTRATION PROCESS UNDER THE PERSONAL DATA PROTECTION ACT AS OF 29 AUGUST 1997, CONSOLIDATED TEXT: JOURNAL OF LAWS 2016, ITEM 922 AS AMENDED. | | | | | | | | | |

Please send us back the registration form by August 31, 2023.

**Conveners:**

**Faculty of Oriental Studies, University of Warsaw**

**National University of Mongolia**

**Ambassador of Mongolia to Poland**