

# I INTERNATIONAL CONGRESS OF PSYCHOPEDAGOGY

## The Psychopedagogist Intervention Field

### Registration Form

#### Personal Details

First name(s): \_\_\_\_\_

Family name: \_\_\_\_\_

Passport number: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_

Country: \_\_\_\_\_ Post Code: \_\_\_\_\_

Email: \_\_\_\_\_ Tel. No.: \_\_\_\_\_

#### Place of work

Department: \_\_\_\_\_

Institution: \_\_\_\_\_

#### Registration data

Paper contribution: Yes  No

Title: \_\_\_\_\_

Closing Dinner: Yes  No  (Price: 30 €)

Cultural Tour: Yes  No  (Free. Limited seats)

Old Melilla Tour: Yes  No  (Free. Limited seats)

Notes:

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#### Group of registration

Professionals

Students

Unemployed

Non European residents

#### **For groups**

Write "Group registration" in NOTES with each one's name and passport no.

Don't forget to send the registration form together with the payment form to the Secretary of the Congress