

**OSEPA Workshop
21-22 November 2012, Sheffield, UK**

REGISTRATION FORM

Please complete this form and return by email to osepa2012@lists.dcs.shef.ac.uk

You should receive an acknowledgement email within 3 working days confirming acceptance of your registration.

| | |
|-----------------------------------|--|
| Title | |
| Name | |
| Organisation | |
| Address | |
| Postal/zip code | |
| City | |
| Country | |
| Email | |
| Telephone | |
| Status | Student / Academic / Commercial |
| Accommodation Required | Y / N Arriving: Departing: |
| Banquet Event | Y / N Dietary Requirements: |
| Date | |