**REGISTRATION**

**2nd Workshop of Regenerative Medicine in Bordeaux**

**University of Bordeaux**

**Pey Berland Place, Bordeaux 33000**

**October 24- 26, 2016**

**Surname :**

**First name :**

**Laboratory:**

**Courriel:**

**Master ☐**

**PhD ☐**

**Post Doc ☐**

**Communication**

**Oral  ☐**

**Poster  ☐**

***Title :***

***Authors:***

***Affiliations:***

**Lunch October 25 ☐**

**Lunch October  26 ☐**

**Gala dinner October, 25** *(included in the Registration Fees)* **☐**

**Visit of Wine City and wine testing ☐**

**October 25, 2016. 17:30-19h** *(10 euros) (Optional)*

**Registration must be sent to** Reine Bareille (reine.bareille@inserm.fr) and Joelle Amédée (joelle.amedee@inserm.fr) by email (*deadline on the Registration Fees).*

**Registration Fees**

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| --- | --- | --- | --- | --- |
| Category |  | Early registrationUp to September 1, 2016 |  | Late registrationUp to September 30, 2016 |
| Master / Ph.D. / Post doc |  | 50 € |  | 70 € |
| Technicians, Engineers, Researchers, Clinicians. |  | 100 € |  | 120 € |
| Visit of the Wine City and Testing October 25, 201617:30-19:00 (*Optional*) |  | 10 € |  | 10 € |

**Registration must be sent to** Reine Bareille (reine.bareille@inserm.fr) and Joelle Amédée (joelle.amedee@inserm.fr) by email.

**Payment details :** to Reine Bareille (reine.bareille@inserm.fr), Secretary of BIOMAT

**Order bank :** to BIOMAT

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N° SIREN : 339 491 888

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