***Focus on the learner: Contributions of individual differences to second language learning and teaching***

**Konin, October 17th-19th, 2016**

REGISTRATION FORM

(separate forms necessary for co-speakers)

Name: .........................................................................................................................................

Academic title: ...........................................................................................................................

Affiliation: ....................................................................................................................................

Mailing address: ....................................................................................................................

Tel./fax: ........................................................................................................................................

e-mail: ..........................................................................................................................................

Do you wish to present a paper? YES NO

The title of the paper: .................................................................................................................

.....................................................................................................................................................

.....................................................................................................................................................

Equipment required: ...................................................................................................................

Special requirements (vegetarian meal, etc.): ..............................................................................

Do you wish to receive an invoice? YES NO

The invoice should be issued to:

Name and surname of the conference participant **OR** name of the institution:………………

…………………………………………………………………………………………………

Address:……………………………………………………………………………………….

…………………………………………………………………………………………………

VAT code (if applicable): …………………………………………………………………….

Completed registration forms should be returned no later than **August 31st, 2016** to the address: focusonthelearner2016@gmail.com.