

ARCA 2010

1<sup>ST</sup> CONFERENCE WITH INTERNATIONAL PARTICIPANTS:  
„INNOVATIONS LEADING TO COMPETITIVENESS“

30<sup>TH</sup> SEPTEMBER - 1<sup>ND</sup> OCTOBER 2010

NATIONAL AND UNIVERSITY LIBRARY, ZAGREB, CROATIA



REGISTRATION FOR PARTICIPANTS

If you are interested to participate at Conference please fill Registration Form and send us back on E-mail address: [arca2010@inovatorstvo.com](mailto:arca2010@inovatorstvo.com) or by Fax: +385 (0)1 48 86 549 including September 10<sup>th</sup> 2010.

**A – Participant (please with uppercase words)**

|  |                      |                      |
|--|----------------------|----------------------|
| Vocation<br>Professional/academically degree | <input type="text"/> | <input type="text"/> |
| Name   | <input type="text"/> |                      |
| Last name                                    | <input type="text"/> |                      |
| Place and date of birth                      | <input type="text"/> |                      |
| Address<br>(street and number)               | <input type="text"/> |                      |
| Postal code and city                         | <input type="text"/> | <input type="text"/> |
| Country                                      | <input type="text"/> |                      |
| Phone:                                       | <input type="text"/> |                      |
| GSM  | <input type="text"/> |                      |
| E-mail                                       | <input type="text"/> |                      |

**B – Institution/organization you present**

|  |                      |
|--|----------------------|
| <b>Institution/organization</b>                                | <input type="text"/> |
| Address<br>(street and number) <b>Institution/organization</b> | <input type="text"/> |
| Postal code and city <b>Institution/organization</b>           | <input type="text"/> |
| <b>Phone</b><br><b>Institution/organization</b>                | <input type="text"/> |
| <b>GSM</b><br><b>Institution/organization</b>                  | <input type="text"/> |
| <b>E-mail</b>  | <input type="text"/> |

Signature: \_\_\_\_\_