

**REGISTRATION FORM**

**I Congreso Internacional de Educación intercultural y género: una mirada inclusiva es posible**

30 y 31 de octubre de 2019

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| **PERSONAL INFORMATION** | | |
| NAME: | Please enter your full name | |
| I.D. CARD / PASSPORT: | Please enter your ID Card or Passport | |
| COUNTRY:  Please enter your country | CITY:  Please enter your city | STATE/COUNTY:  Please enter your state/county |
| PHONE:  Please enter your phone | EMAIL:  Please enter your email | |
| Please indicate your modality of participation in the Conference:  Please indicate Attendee or Participant with communication | | |
| I will attend the cultural activity: Alma de Córdoba – Night visit to the Mosque-Cathedral in Cordoba that will be held on Wednesday evening, October 30:  Please indicate Yes or No | | |
| I will attend the cocktail that will be held on Wednesday evening, October 30:  Please indicate Yes or No | | |
| \*Once the registration form has been completed, please send it and the abstract of the proposal for communication to the following email: catedraintercultural@uco.es | | |