

## CONFERENCE REGISTRATION FORM

### *Lexical combinations and typified speech in a multilingual context*

Innsbruck, February 11<sup>th</sup> - 13<sup>th</sup> 2016  
Karl-Rahner-Platz 1, A-6020 Innsbruck

We kindly ask you to send the completed registration form (with advance payment by bank transfer including the receipt of payment) to [leko2016@uibk.ac.at](mailto:leko2016@uibk.ac.at).

<b>Surname</b>				
<b>First Name</b>				
<b>Title</b>				
<b>University and Department / Institution</b>				
<b>E-mail address</b>				
<b>Address</b>	<b>Street, house number</b>			
	<b>Post code, city</b>			
	<b>Country</b>			
<b>Type of participation</b>		<input type="checkbox"/> with presentation	<input type="checkbox"/> with poster	<input type="checkbox"/> without presentation or poster
<b>Title of proposal (presentation or poster) (if applicable)</b>				
<b>Co-authors (if applicable)</b>				
<b>Would you like to participate in the complimentary city tour? (on Feb 12<sup>th</sup>, planned from 1.45 pm to 2.45pm)</b>				
<b>Do you have any food allergies?</b>				
<b>Would you like to participate in the conference dinner? (on Feb 12<sup>th</sup>, approx. 40 euro)</b>		<input type="checkbox"/> yes	<input type="checkbox"/> yes (vegetarian)	<input type="checkbox"/> no
<b>Would you like to participate in the final excursion? (on Feb 13<sup>th</sup> afternoon, approx. 20 euro)</b>				

**Note: Co-authors who wish to participate in the conference need to register separately!**