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| Registration & Abstract Form for the 2nd INTERNATIONAL MEETING ‘AGRISCIENCE & PRACTICE’  |
| Name and title of the participant: Mr./Ms./Prof./PhD |
| Phone:  | E-mail:  |
| Affiliation:  |
| Affiliation address:  |
| Abstract title:  |
| Author/s and author/s affiliation:  |
| Abstract (max 250 words):  |
| Key words (3-7 words which are not included in the title): |
| I would like to participate at the Meeting with (check the preferred option): |
| [ ]  oral presentation |
| [ ]  poster  |
| [ ]  panel discussion |
| [ ]  exhibition stand |
| Please, use the Registration & Abstract Form for each of your submissions. Participants who will join the Meeting without oral/ poster presentation fill in only their personal information.Please, send the Registration form to agriscience-practice@ugd.edu.mk before 05.03.2019.  |