**Registration form for CAF2024**

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| **Personal information** |
| Name (The same name provided in the abstract of your paper, if submitted): |
| First (given) name:  |
| Middle name:  |
| Last (family) name: |
| Affiliation (The address provided in the abstract of your paper, if submitted): |
| Company (university, institute, organization): |
| PO Box or Unit number, street and number: |
|  |
| City: Province: Country: Postal code: |
| Phone number (work):  | Cell phone: |
| Email: |
| **Paper 1 information, if submitted:** |
| Title of the paper: |
| Authors list (the same order as in your abstract, if submitted): |
| Corresponding author: |
| Presenter if different from Corresponding author: |
| **Paper 2 information, if submitted:** |
| Title of the paper: |
| Authors list (the same order as in your abstract, if submitted): |
| Corresponding author: |
| Presenter if different from Corresponding author: |
| **Workshops**Will attend workshop on Monday (August 19, 2024): Yes/No Will attend workshop on Tuesday (August 20, 2024): Yes/No |
| **Registration and payment information** |
| Total payment:  | Please tick registration items: Full registration (C$800); Student registration (C$400); Developing country participant registration (C$400); Partner registration (C$400)  |
| Payment method (List one of the following: money order, bank draft, credit card, or bank transfer) and email the proof of payment to digvir.jayas@umanitoba.ca: |
| **Money order or bank draft** (Use the following information for your money order or bank draft): |
| The payee's name: CAF2024  |
| The payee's address: 49 Westwater Drive, Winnipeg, MB, Canada R3X2G2 |
| **Credit card** (Please submit payment via Payment button towards the bottom of the website) |
| **Direct Transfer to CAF2024 Account** (please email to Digvir.Jayas@umanitoba.ca for the required information) |
| **For pre- and post-conference tours**, please contact the tour provider(s) directly. |
| **Submission**  |
| Please mail money order or bank draft to: Dr. C.B. Singh, Unit 314, 620 Columbia Blvd West, Lethbridge, AB, CANADA T1K 7A8.**Please send this completed form to digvir.jayas@umanitoba.ca** |