**Workshop**

**3 – MCPD IN EDIBLE VEGETABLE OILS OCCURRENCE**

**AND ANALYTICAL METHODS**

***Udine, June 8th 2016***

**SCHEDA DI ISCRIZIONE /REGISTRATION FORM**

**da Compilare e reinviare via e-mail a**

**To be filled and send by e-mail to**

[**3MCPD.SISSG@gmail.com**](mailto:3MCPD.SISSG@gmail.com)

**Fees payment by bank transfer at the following IBAN**

**IT 04 R 03359 01600 100000119658**

**BANCA PROSSIMA - Filiale di Milano - 20121 Piazza Paolo Ferrari 10 – Milano**

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| --- | --- | --- | --- | --- |
| **Nome / First Name** |  | | | |
| **Cognome /Family Name** |  | | | |
| **Azienda / Ente**  **Company /Organisation** |  | | | |
| **Socio SISSG or EFL**  **SSSG or EFL Member** | **SI**  **YES** |  | **NO**  **NO** |  |
| **Indirizzo**  **Address** | **Via/piazza……………………………………**  **Road/Square…………………………………** | | | |
| **Città**  **Town** |  | | | |
| **CAP**  **ZIP Code** |  | | | |
| **Paese**  **Country** |  | | | |