**MathStatNeuro**

Please fill this form and send it to malot@unice.fr for a pre-registration.

**Personal information :**

* First Name :
* Last Name :
* Email :
* Laboratory :
* Country :

**Practical information :**

* day of arrival :
* day of departure :
* lunches :
	+ Tuesday yes no
	+ Wednesday yes no
	+ Thursday yes no
* conference dinner : yes no