Registration form

Fifth Workshop on Baltic Sea Ice Climate 31, August-2, September, 2005 ZMAW, Hamburg, Germany,

Please fill in the registration form and send it to the address below before 31 May, 2005.

| Title: |
|---|
| Institute: |
| Address: |
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| |
| Phone: |
| Fax: |
| E-mail: |
| ☐ I intend to participate in the workshop |
| ☐ I want to make the following presentation: |
| |
| |
| |
| as oral: as poster presentation: |
| Dinner |
| I would like to attend the workshop dinner withperson (s). The approximate fee is 30 Euro/per person. |