

**Austrian Society for Extracellular Vesicles**

***Symposium on Extracellular Vesicles***

November 22nd – 23rd, 2018

Danube University Krems

Dr.-Karl-Dorrek-Strasse 30

3500 Krems, Austria

**Registration:**

First name: ……………………………………………………………………………………

Last name: ……………………………………………………………………………………

Institution: ……………………………………………………………………………………

Address: ……………………………………………………………………………………

 ……………………………………………………………………………………

Phone: ……………………………………………………………………………………

E-mail: ……………………………………………………………………………………

**Registration until 15th November, 2018**. Registration fee includes conference access, coffee breaks, and lunches.

Please check: 🞎 **50€** - ASEV Member

 🞎 **80€** - Non ASEV Member

 🞎 **30€** - Student

 🞎 **20€** - I attend the get-together (“Heuriger”)

 Registration **after 15th November, 2018** charges an **additional amount of 50€.**

I register for the “Symposium on Extracellular Vesicles”, November 22nd – 23rd, 2018.

 Date: ……………………. Signature: ……………………………………………………

 **Please send your registration to:** Dr. Andreas Spittler

 Fax: (+43/1) 40400 - 73579

 E-mail: andreas.spittler@meduniwien.ac.at

Please transfer the amount to the following **account:**

Österr.Ges.f.Extrazell.Vesikel, Unicredit Bank Austria AG;

**IBAN:** AT70 1200 0100 1812 3702, **BIC:** BKAUATWW

Please specify **„EV Symposium 2018“** and the **name of the participant**.