

INVOICE FORM

Identity, Boundaries and Social Divisions. Reconciling Competing Frames - University of Pisa, 5-7 June 2024

This form, filled in all its parts, should be sent to the following email addresses: michele.neri@unipi.it and grouned-theory@sp.unipi.it with a copy of the bank transfer and a copy of Passport/ID.

Personal Information

Name and Surname _____

Gender* Male Female

Nationality _____

Address _____

ZIP code _____

City _____

Country _____

e-mail _____

Phone number _____

Passport number or ID number _____

Institution/Company Information

Current Position* _____

University/Company affiliation _____

Address _____

ZIP code _____

City _____

Country _____

VAT number/ _____

Invoice details (please select one of the two options below)

1) Private participant

Name and Surname _____

Place*** and date of birth _____

Fiscal Code _____

VAT number/Registration number _____

Fiscal Address (Address, ZIP Code, City, Country)

Phone/Fax number _____

e-mail _____

2) University/Company affiliation

Institution _____

Fiscal Address (Address, ZIP Code, City, Country)

Fiscal Code _____

VAT number/Registration number _____

Phone/Fax number _____

e-mail _____

*Fill in the gender as it appears in your documents – info requested only for administrative reasons

**Student, PhD student, researcher, assistant professor, professor, etc.

*** Please insert both the name of the city, and also the name of the Country of birth (e.g. Milan, Italy).

Processing of personal data (Italian Legislative Decree 30/06/2003 n. 196): Information and consent

We wish to inform you that personal data provided for conference registration will be processed by the University of Pisa, according to Article 13 of the mentioned Legislative Decree. Appropriate measures will be taken to ensure personal data security and confidentiality, in accordance with the above regulations. Collected data will be only used for administrative tasks and notes and they will not be shared with third party. You can exercise your rights under Article 7 of Legislative Decree 196/03 applying to University of Pisa - Department of Political Sciences, Via Serafini, 3, 56126, Pisa (Italy).

The undersigned, by communicating his/her data, agrees to the processing of his/her data by the University of Pisa - Department of Political Sciences. By communicating his/her data, the undersigned further states that he/she is duly informed of the provisions of Italian Legislative Decree 196/ 03.

Date _____

Signature _____