**GROUPS OF GALAXIES IN THE NEARBY UNIVERSE**
**2005 ESO WORKSHOP**
**December 5-9, 2005. Santiago, Chile**

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**REGISTRATION FORM**
**(Registration and payment deadline: July 31, 2005)**

**Family name: ……. First name: …….**
**Institute: ……**
**Address: ……**
**Zip code/City: …… Country: …….**
**Phone: …… Fax: …….**
**E-mail address: ……**

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**Registration fee: € (Euros) 240 for PhDs** ☐ **(Payment after July 31: € 264)**
**€ (Euros) 120 for Students** ☐ **(Payment after July 31: € 132)**

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**Registration fee payment:**

☐ ☐ ☐

**AMEX** **VISA** **MASTER**

**Card No. :…… Exp. Date: …….**
**Name as printed on card: ……...**

**Signature: …….**

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**Hotel Torremayor**

**Arrival date: …….. Departure date: ……**

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**Print this form and send it by fax to +56(0)2-4633138**
**Attention: Ms. Paulina Jirón**