**SASBi/SAGS Student Symposium Registration Form**

SECTION A: Registration

|  |  |
| --- | --- |
| First Name(s) |  |
| Last Name |  |
| Degree/Qualification |  |
| Research Interest |  |
| Institutional Affiliation |  |
| E-mail Address |  |
| Mobile Number |  |
| Dietary preferences |  |

SECTION B: Abstract submission

|  |  |
| --- | --- |
| Title |  |
| Authors |  |
| Abstract |  |
| Oral presentation? (Y/N) |  |
| Poster presentation? (Y/N) |  |
| Would you accept an alternative if your selected option is not available? (Y/N) |  |

SECTION C: Travel fellowship

|  |  |
| --- | --- |
| Motivation |  |
| Transport\* required? (Y/N) |  |
| Accommodation\* required? (Y/N) |  |

\*Please include a quote for the relevant dates and locations

*The symposium registration fee is R300, and is separate to the main conference.*

**Bank details**

SASBi Student Council
FNB – Cheque account
Account number: 62702760134
Branch code: 250655

Please use your name and surname as the reference.

Please e-mail proof of payment to mahtaab.hayat@gmail.com .