BOKU UNIVERSITY

LEGUMINOSE
the way to a green transition

Summer School

Modelling Intercropping Systems: From Analysis to Decision Making

Registration Form

Name (First Name, Last Name):

Date of Birth:

Current Position:

University / Organisation:

Department / Institute:

Address (Billing Address for the Registration Fee):

Address:

Postal Code, City:

Country:

Email Address:

Phone Number:

Do you have experience with crop modeling?

- ☐ Yes (please specify tools/software):
- ☐ No

Applicant's Signature:

Date: