



**CERTIFICATE FOR IACM/ECCOMAS MEMBERSHIP
VII International Conference on Adaptive
Modeling and Simulation – ADMOS 2015**

**Nantes, France
June 7 – 10, 2015**

Date:

Participant Full Name:

Name of IACM or ECCOMAS Association:

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Registration Ref. ID:

**This is to certify that is a
member of the IACM / ECCOMAS affiliated Association**

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Association President Signature

Name of President:

Please send this form by fax (34 93 205 83 47) or e-mail to the secretariat.

First Name: Family Name

Organization: Department:

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	FEES (Prices in Euro):	<i>Payment on or before Feb 15 2015</i>	<i>Payment after Feb 15 2015</i>
	ECCOMAS / IACM Delegate Registration	465	560
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