

This is to be filled using Acrobat or Acrobat Reader. Filling in the WEB browser or on mobile directly might not work correctly.

HCI-Europe

International Conferences in Central Europe
on

Human Computer Interaction

<http://www.HCI-Europe.eu>

This forms is to be filled OFF-LINE and sent using your *local* @mail client, e.g. Outlook, Windows Live, etc. In the case of WEB mail, connect first - Google, Yahoo etc. You might need POP and SMTP addresses - check. The contents of the form will be send by @mail as an XML file.

Check your Outbox or Sent mail folders if the form was sent !!!

You can check data to be sent out in your outbox or sent mail folders. NOTE: Some MOBILE PDF Readers do not support this PDF forms.

You CANNOT save the filled form directly, but you can save it by printing to PDP file, e.g. using PDF printer like PDF Creator.

Reviewer Registration

!!! ALL items (*) MUST be filled using PLAIN ASCII (ENGLISH) alphabet only !!!

First Name* Last Name* Country*
 (Given name) (Family name)

E-mail*

We need to evaluate your research orientation and activities, please, INSERT your RESEARCH homepage address correctly

Your homepage*
 URL address

Replace "xxx" correctly - please, check

Please, SELECT fields of your experties - **should** be different

Field 1*

Field 2

Important: Do not use "Cut"&"Paste" from WEB pages/ MS Word etc. directly as it **might contain** invisible characters. Use NOTEPAD instead!

In the **case of problems in sending** the form check all @mail addresses, probably contains **invisible** characters at the end of it.

If you have any proposal for a good reviewer, insert contact information

First Name* (Given name)	<input type="text"/>	Last Name* (Family name)	<input type="text"/>
Abbreviation* (Smith,J.K.)	<input type="text"/>	Country*	<input type="text"/>
E-mail*	<input type="text"/>		
First Name	<input type="text"/>	Last (Family) Name	<input type="text"/>
Abbreviation e.g. Smith,J.	<input type="text"/>	Country	<input type="text"/>
E-mail	<input type="text"/>		
First Name	<input type="text"/>	Last (Family) Name	<input type="text"/>
Abbreviation e.g. Smith,J.	<input type="text"/>	Country	<input type="text"/>
E-mail	<input type="text"/>		
First Name	<input type="text"/>	Last (Family) Name	<input type="text"/>
Abbreviation e.g. Smith,J.	<input type="text"/>	Country	<input type="text"/>
E-mail	<input type="text"/>		
First Name	<input type="text"/>	Last (Family) Name	<input type="text"/>
Abbreviation e.g. Smith,J.	<input type="text"/>	Country	<input type="text"/>
E-mail	<input type="text"/>		

Print the filled form and check it carefully **before** submitting it.

Date [yyyy-mm-dd]: *

CHECK - if the @mail addresses do not contain invisible chars, especially at the end !! You will be informed when data are processed (the form is processed via @mail based services and it might take a longer time as it is OFF-line concepts based info processing).

Form processing and verification might take a minute or two, please, wait.

Content of this form will be sent by @mail via your outbox as an XML file - please, do not change the data in the file to be sent. All the data will be used only for the events organized. Data will not be given/sold/shared etc. with other bodies.