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| **Form of Participation**  **(without paper presentation)**  **(The 10th International Conference on Languages, Linguistics, Translation and Literature)** | |
| **Please fill out the form carefully and send it through info@tlll.ir** | |
| Title (Mr. / Ms.): | |
| First name: | |
| Last name: | |
| Institution / Organization: | |
| Academic degree: | |
| Current situation (Teacher / Student / Retired): | |
| Email: | |
| Mobile number: | |
| WhatsApp number(*If any*): | |
| Postal address: | |
|  | **Does your family wish to join the conference?** (It is free)  (Yes or No, if yes, please explain how many members?) |