|  |  |
| --- | --- |
| **Biography for abstract submission** | |
| **Full name:** |  |
| **Position/Department/Organization:** |  |
| **Country:** |  |
| **Biography:**  **(Word count should not exceed 50 words)** |  |
| **Contact information** | |
| **Adress:** |  |
| **Contact or mobile number:** |  |
| **E-mail address:** |  |
| **Twitter account:** |  |
| **LinkedIn account:** |  |
| **Presentation category:** | Oral presentation  Poster presentation  Virtual presentation |
| **Your abstract** | |
|  | |

**“Sexuality in Europe now”**

**Abstract Submission Form**