



FRONTIERS IN IMMUNOLOGY RESEARCH NETWORK

FIRN, 64 Holden Street, Worcester, MA 01605, USA

Email: hkan@firnweb.com, Tel: 508-852-3937

13th INTERNATIONAL CONFERENCE

(Register [here](https://www.conferences-firn.com/participation-registration/) or link to <https://www.conferences-firn.com/participation-registration/>)



FLORENCE, ITALY

July 1-4, 2023

Croce di Malta Hotel



CALL FOR PARTICIPANTS

(Deadline for Abstracts and Early Registration: March 30, 2023)

The Frontiers in Immunology Research Network (**FIRN**) invites you to participate in its **13th International Conference** to be held in **Florence, Italy**, at the **Croce di Malta Hotel**, **July 1-4, 2023**. The conference welcomes researchers from academia, corporations, governments and other organizations. Participants may participate as observers or as presenters (oral or poster, time allocated for each presenter is 20 minutes.) The program will consist of sessions with featured speakers, small concurrent presentation sessions, poster sessions, roundtable thematic discussion sessions with moderator (put together by conference organizers), and occasional workshops.

ABSTRACT SUBMISSION DEADLINE: MARCH 30, 2023

- Please, submit your abstract in both Word and PDF (of no more than 200 words) online at (www.firnweb.com) by **MARCH 30, 2023**. All abstracts submitted will be evaluated for presentation and publication in the **Book of Abstracts** which will be available at the Conference.
- You may submit up to 2 abstracts.
- Please report the categories that best fit your abstract;
- For co-authorships please include names, affiliations, and postal / email addresses of all authors and indicate who will serve as presenter.

Conference Registration Fees and Payments
Online Registration
 (Please register [here](https://www.firnweb.com) or link to <https://www.firnweb.com>)

CONFERENCE FEES

1	Registration Fee	\$440
2	Attending Co-Author Fee	\$340
3	Student Fee	\$340
4	Observer Fee	\$340
5	After April 30, 2023, add late fee to the above fees	\$50
6	Guest / Companion fee	\$140
7	TOTAL AMOUNT DUE	

Note: Registration fees include **2023 Membership Benefits** (discounted subscriptions to Immunology journals), **Exhibitions**, and **Access to all Conference Sessions, Reception, Lunch, and Coffee Breaks.**

ALTERNATIVE FORMS OF PAYMENT

If you would like to pay by check or via bank transfer, please contact us as follows:

FIRN, 64 HOLDEN STREET
 WORCESTER, MA 01605-3109, USA
 TELEPHONE: (508) 852-3937
 FAX: (508) 595-0089
 EMAIL: hkan@firnweb.com,
 WEB: <https://www.firnweb.com>

Refunds: Individuals applying for program participation but not accepted are eligible for fee refunds. Cancellations must be in writing and are subject to a \$60 handling fee. No refunds will be given for cancellations after **May 30, 2023**. Refunds will be processed after the conference.

HOTEL RESERVATION FORM: [CROCE DI MALTA HOTEL, FLORENCE, ITALY](#)
 (Block Name for Hotel: [Frontiers in Immunology Research Network International Conference, July 1-4, 2023](#))

- The Croce di Malta Hotel is located only a few steps from both the Arno River and the Santa Maria Novella railway station. The church of the same name makes up one of the corners of an ideal triangle of works of art linking Piazza Santa Maria Novella, the Ponte Vecchio and Piazza Duomo, all of which only a few minutes' walk away. The hotel is about 6 km from the Florence-Peretola Airport.
- **A block of rooms has been reserved until June 6, 2023.**
Reservations made after that date will be subject to hotel availability; please reserve as early as possible.
- **The room rate, inclusive of buffet breakfast, is €160 (single) or €190 (double).**
- You may book directly to the hotel [here](#); alternatively, you may post or email the form below to the hotel.
- You may pay by international money order (payable in Euros to the Croce di Malta Hotel) or major credit card. The first night's deposit is required with reservation (non-refundable if cancelled 7 days or less prior to arrival.)

Last Name: _____ First Name: _____ Middle Initial: _____

Mailing Address _____

Telephone: Day (_____) _____ Email: _____

Arrival date: _____ Departure date: _____

Smoking: ___ Non-Smoking: ___ Single: ___ Double: ___ King Bed: ___ Two-Bedded Room: ___ Number of People in Room: _____

Payments: _____ My international money order is attached payable in Euros to "Croce di Malta Hotel"

Please charge my _____ Visa _____ MasterCard _____ American Express.

Card # _____ CVV # _____ Exp.Date _____ Authorized Signature _____

PLEASE KEEP A COPY OF THIS FORM FOR YOUR RECORDS AND POST OR EMAIL THE ORIGINAL TO:

[Croce di Malta Hotel, Via della Scala, 7 - 50123 Florence, Italy](#)
 Telephone: +39 055 261870 / +39 055 218351, Email: info@crocedimaltaflorence.com
 URL: <https://www.crocedimaltaflorence.com/index.php>