

**EPSU Youth Network meeting
Berlin, 8-9 September 2017**

REGISTRATION FORM

FAMILY NAME

FIRST NAME

UNION

COUNTRY

E-MAIL where you can be contacted (phone number if fax/E-mail not available) & where to send meeting documents

.....

WILL / WILL NOT participate in the above meeting (please circle)

I need a room for the night of 7 September YES-NO (please circle)

I need a room for the night of 8 September YES-NO (please circle)

If required for visa purposes only:

Passport details:

Birth date.....

Place of birth

Nationality:

Passport N°.....

Date and place of issue

Date of expiry:

To be returned **preferably by email BY 28 June 2017 at THE LATEST** to:

EPSU Secretariat
40, Rue Joseph II
B – 1000 Brussels
BELGIUM

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FAX : +32 2 250 10 99