

PRESS REGISTRATION FORM

PLEASE send to johanna.kloeck@fefco.org or fax to +32 2 646 64 60

FEFCO Summit

To obtain a Press badge, please fill in the necessary information below:

	9-,			
Contact details				
☐ Mr. ☐ Mrs. ☐	Ms			
First name		Last name		
Function Address		Newspaper/Magazin	e	
Postal Code	City	Country		
Direct phone #		Direct fax #		
Email*			* All related communication w	ill be by email.
Wednesday 4 th June	<u>2014</u>			
I will attend the welcome cocktail from 19:0-20:30			☐ Yes	☐ No
Number of persons	attending the welcome cocktail	l:		
Thursday 5th June 20	<u>14</u>			
I will attend the Get-Together dinner as of 19.30			☐ Yes	☐ No
Number of persons	attending the Get-together dinr	ner:		