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Application for membership
(please fill in electronically, but print, sign and scan before sending)

Name of Society/Group:

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Month/year of entry:

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Please tick the following boxes

- I, as a representative of our society, apply for membership in EUFAS for our society
- I agree that my name and e-mail will appear on a list of representatives for the EUFAS member societies
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Date:

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President: Professor, Dr. Geert Dom
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