

## **2016 ASPHER General Assembly**

Athens, May 25, 9:30-15:00 (local time)

## Registration and voting rights form

Please complete this form by Monday 27<sup>th</sup> April 2016 at the latest and send back to office@aspher.org

Full Name:
Position:
Name of School/Institution:
<b>A)</b> I will attend in person the 2016 ASPHER General Assembly.

I also wish to accredit the following person as an observer (optional): Full Name: \_\_\_\_\_\_ Position: \_\_\_\_\_\_

**B)** I will NOT attend in person the 2016 ASPHER General Assembly and I wish to nominate the following person to represent (*write here the name of your school/institution*)

\_\_\_\_\_

with the voting rights.

Full Name of nominated person:
Position:

**C)** Unfortunately, we will NOT be represented at the 2016 ASPHER General Assembly.

Date / Place:

Signature / Stamp: