

## PARTICIPANT REGISTRATION FORM

Available online: www.iwcb.ro

Company:			• • • • • • •
Company acting as:			
Producer Negocia	nt Importer	Representative	
Other company:			
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Full address:		VAT code 🕝	
<b>T</b> City:		YES NO	
Postal code:		VAT number:	
Country:			
Phone:		E-mail:	
<b>C</b>	×		
Authorized person name:		Website:	
1	(1)		
Position:			
I, the undersigned, Mrs/Mr representative for the above men	ntioned company, declare	e that I have read and understood	the
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