



## APPLICATION FORM

Kindly fill in Registration Form below, specify Seminar Title and send via email to [administrator@mumn.org](mailto:administrator@mumn.org) together with payment. If paying online, please send transaction proof of payment and a copy of the Vaccine Certificate with application.

Title of Seminar: \_\_\_\_\_

Date of Seminar: \_\_\_\_\_

Name and Surname: \_\_\_\_\_

Address: \_\_\_\_\_

Email Address: \_\_\_\_\_

ID Number: \_\_\_\_\_

Mobile/Telephone: \_\_\_\_\_

Food allergies: **NO / YES** \_\_\_\_\_

Copy of Vaccine Certificate \_\_\_\_\_

### Lunch Menu:

\_\_\_\_\_ Tuna Salad

\_\_\_\_\_ Chicken Salad

\_\_\_\_\_ Chicken Baguette

\_\_\_\_\_ Egg/Mayo Baguette

\_\_\_\_\_ Maltese Ftira

### Prices:

€20 Members \_\_\_\_\_

€25 Non Members \_\_\_\_\_

€15 Students/Pensioners \_\_\_\_\_

Kindly tick:

Type of Payment: Online \_\_\_\_\_ Cheque \_\_\_\_\_ Cash \_\_\_\_\_

### **Online Banking Info:**

IBAN Number: **MT49VALL22013000000040017158332**

SWIFT CODE: **VALLMTMT**

CHEQUES ARE MADE PAYABLE TO **MUMN**.