

**8th AIDA Europe Assembly**, Zurich, 5 October 2022

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| **Assembly Form** | **NOTE: Assembly Form to be sent by 04 October 2022 to the AIDA Europe Secretariat at the two following addresses:** **aidaeuropesecretariat@aidainsurance.org** **, and** **a.christofilou@rokas.com** |

Name of your **Chapter**: …………………………………………………………………….

On behalf of our Chapter the following person(s) will be attending the Assembly.

**Person 1**

|  |  |
| --- | --- |
| Name of **Representative(s)**: | ……………………………………………………………………………………… |
| **E-Mail Address(s**): | ……………………………………………………………………………………… |
| Attendance in Person at the Assembly **Venue** | Yes / No\* |
| Attendance in Person by way of **Zoom Meeting** | Yes / No\* |
|  | \* delete as appropriate |

**Person 2**

|  |  |
| --- | --- |
| Name of **Representative(s)**: | ……………………………………………………………………………………… |
| **E-Mail Address(s**): | ……………………………………………………………………………………… |
| Attendance in Person at the Assembly **Venue** | Yes/No\* |
| Attendance in Person by way of **Zoom Meeting** | Yes/No\* |
|  | \* delete as appropriate |