

# European Confederation of Motorcycle Clubs



## Registration Form

### ECMC AGM - Attendance

Please fill out this interactive form and send it to [info@ecmc.eu](mailto:info@ecmc.eu) as soon as possible.

Association name:

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Full name:

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Function:

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E-mail:

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### My association will be represented at the AGM

Please state the person from your association who will attend as a *Delegate* or the person who will act as a *Proxy* for your association. This person will also have voting rights if your association has full member status. Associations attending in person can register a second Delegate. If your association is not a (provisional or full) member you cannot register any Delegates. Use section for Observers instead.

**Full name**

**E-mail**

1st Delegate or Proxy:

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In case of Proxy, state association name of 1st Delegate:

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2nd Delegate:

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Member associations may add up to one Observer in addition to their Delegates. Associations participating as Observers may register up to two Observers.

1st Observer:

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2nd Observer:

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### My association will not be represented at the AGM

#### Confirmation:

I hereby acknowledge that the organizing association and the *ECMC* are authorized to retain the submitted data in their database and documents. Information will be utilized solely for the purposes of organizing, documenting, and communicating about the event, including motions and decisions.

Location, date: \_\_\_\_\_

Signature: \_\_\_\_\_