

## **REGISTRATION FORM**

Requested to be filled individually for each S.: or B.: To be returned to umm2023@ombl.net before Friday, 25<sup>th</sup> March 2023.

OBEDIENCE		Fondation Date
Personal Information	on	
Surname(s) B∴	S.:.	First Name(s)
M∴ Quality		
Address		
City	Postal Code	Country
E-mail		Mobile Phone
	@	+
Telephone		Telefax
+		+
Accompanied Profane(s)	,	
I REQUEST HOTEL	RESERVATION	
Travel Details		
Arrival Date	Arrival Time	Carrier & Flight
Departure Date	Departure Tim	e Carrier & Flight