



INSCRIPTION FORM

INSCRIPTION DATE: _____

MEMBERSHIP No.: Filled by Euroavia

PERSONAL INFORMATION

FIRST NAME: _____

LAST NAME: _____

NATIONALITY: _____

DATE OF BIRTH: _____

GENDER: _____

CONTACT INFORMATION

UNIVERSITY NAME: _____

COURSE: _____

CURRENT YEAR OF STUDIES: _____

PERSONAL EMAIL ID: _____

UNIVERSITY EMAIL ID: _____

TELEPHONE No.: _____

WhatsApp No.: _____

ADDRESS IN FRANCE: _____

COMMENT:

I hereby accept the EUROAVIA TOULOUSE conditions and agree to pay the registration fee of:

15€ for 1 year

20€ for 2-3 years

I agree EUROAVIA TOULOUSE to use my personal information solely for academic and professional purposes only, always for the benefit of me. Furthermore, I give EUROAVIA TOULOUSE the right to contact me via email and telephone for any ongoing events and updates.

Signature