



Reservation form Vacancies

Reservation date: ../../....

> Your Contact details

Name:.....

First name:.....

Company:.....

Function:.....

Telephone:.....

Fax:

E-mail:

> Your Invoice details

Invoice Company:.....

Invoice Street @ number:.....

Invoice Postal code @ city:.....

Invoice Country:.....

VAT number:.....

E-mail for invoice:.....

> Reservation (please cross your choice):

- One vacancy for 200 Euros
- Two vacancies for 375 Euros
- Three vacancies for 500 Euros

> Please send this reservation form to:

- FAX: +32 9 210 98 05
- EMAIL: info@staff.vlerickalumni.com