

FIATA

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Name change of an Individual FIATA Member

Former name of the company: _____	
New name of the company: _____	
Address	Street: _____
	P.O. Box: _____
	City: _____ ZIP-Code: _____
	Country: _____
Phone no: _____	Telefax no: _____
Internet	e-mail: _____
	web site: http:// _____
Name of the Managing Director: _____	

Place and Date

Stamp and Signature

THIS FORM WILL ONLY BE ACCEPTED IF WRITTEN BY TYPEWRITER OR ELECTRONICALLY

Statement of the FIATA Association Member in your country:

In accordance with the FIATA Statutes we do not object to the name change of the above Individual Member of FIATA.

Place and Date

Stamp and Signature