 GeMUN 2018

GeMUN Committee, Via Bertani 6, 16125 Genoa

Tel.+39010811634/fax+390108391360/e-mail:gemunoffice@gmail.com website:www.gemun.it

**UniLevel Application Form**

**Advisory Panel on Government and Cooperation**

**Return by 1st February 2018 to** **gemunoffice@gmail.com**

Name:………………………………………………………………………………………………

Sex: M/F Nationality………………………………………………………………………..………… Date of Birth(D/M/Y)……………………….……

University:……………………………………………………………………………………...................……………… Age:……………………..

Private Address:………………………………………………………………………………………………………………………………………………………………………………..

Private Tel.:………………………………………………………………..………………

Private E-mail……………………………………………………………………………………..

I hereby apply for the position of Advisory Panel at the 15th GeMUN, 22rd-24th February 2018.

Country preference (rank 5 countries)

1. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 4 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 5. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I agree to pay individual fee:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(mention chosen Option)

Option 1 €50 includes delegate folder, badge, certificate.

Option 2 €70 includes delegate folder, badge, certificate, 3 lunches and final party.

to the GeMUN Committee. Transfer the amount before Monday, 5 February 2018, to the following bank address:

Banca Carige S.p.A.

 Address: Agenzia 46 Genova – 098, Via Garibaldi, 8 - 16124 Genova, Italy

Account name: F.U.L.G.I.S. Fondazione Urban Lab Genoa International School

Account number 000003398380

ABI 06175

CAB 01595

BIC(Swift code) CRGEITGG098

IBAN IT32R0617501595 000003398380

(Mention GeUniMUN 2017, name surname)

Date……………………………………………………………………… Signature…………………………………………………………………………………………………..