**“Africa Business and Investment Opportunities”**

**Tuesday, 11th of November 2014**

**Venue: Luxembourg Chamber of Commerce**

**Registration Form**

Company:

Address:

Phone: / Fax:

E-mail: / Web-site:

Name and Title of the participant(s)

Will participate at the seminar:

[ ]  YES [ ]  NO

 Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_