





Please return the completed form no later than November 7, 2011 to:

Chamber of Commerce Mrs. Viviane Hoor

E-mail: viviane.hoor@cc.lu

Fax: 42 39 39-822

Seminar "Doing Business with the Arab countries in the light of the recent development in the Arab world"

Registration form

1) Participating company:	
Name:	
Address:_	
Phone:	Fax:
E-Mail:	Internet:
2) Partici	pant(s):
Name & F	First name:
Function:	
E-mail:	Mobile phone:
Name & F	First name:
Function:	
E-mail:	Mobile phone:
Please in	dicate in which part of the program you will participate:
	☐ Business Seminar
	□ Networking Reception
Date:	Signature: