



INTERNATIONAL MODEL UNITED NATIONS OF ALKMAAR

FORM FOR INDIVIDUAL REGISTRATION

Deadline: 16 February 2019

Please complete this form and return it to the IMUNA Secretariat, of which the correspondence address is stated below, either by post or e-mail. Please make sure the text is legible and that all fields are filled out.

PARTICIPANT'S INFORMATION

Name of Participant _____
Name of School _____
Home Address _____
Country _____
Telephone _____
Fax _____
E-mail address _____

PERSONAL REQUESTS

- I intend to request housing.
 I request an IMUNA Audio Guide for delegate preparation.

Please rank your delegations and respective forums in order of preference:

01. _____ 05. _____ 09. _____
02. _____ 06. _____ 10. _____
03. _____ 07. _____ 11. _____
04. _____ 08. _____ 12. _____

Please note that the IMUNA Organization reserves the right to assign a delegation to you that you have not requested. We do take every request into consideration.

PARTICIPATION AGREEMENT / FINANCIAL GUARANTEE

I understand fully my obligations with regard to attendance and due fees, and I agree to abide by the conditions and requirements as stated in the current IMUNA Handbook for Participation, which can be found on our www.imuna.nl. The fees due will be transferred to the IMUNA bank account before the payment deadline.

Please note that this guarantee must be signed by the participant. If the participant has not yet attained the age of 18 his/her parent(s) or caretaker(s) / guardian(s) must also sign.

Signature participant _____ Signature parent (if participant is under 18) _____

Name participant _____ Name parent (if participant is under 18) _____