

Main Representative Change Form



Member name (company name)

Contact details for new Main Representative

Name (in full, including title Mr / Ms)

Job title

Email address

Office address

Telephone (incl. country code)

Mobile number

Terms and conditions

I am aware that (mandatory)

- Membership is renewed automatically each year unless written termination, by registered mail, is received four weeks prior to 31 December

Full name:

Signature: Date:

Please sign and return this form to: info@inrev.org