Swiss Aircraft Maintenance Association

Schweizerischer Verband Flugtechnischer Betriebe Association Suisse des Entreprises Aérotechniques Associazione Svizzera Manutenzioni Aeronautiche



Application form for General Familiarization training (WBT)

*mandatory

Invoicing details (Company or private address & contact person):		
*Family name:	*First name:	
*Phone:	*Email address:	
Company:		
*Street:	*Date:	
*ZIP *Town:	Signature:	
*I have read the <u>privacy policy</u> and agree to it.		
Student details:	_	
*Family name:	*First name:	
*Eamil address:	*Date of birth:	
IF YOU HAVE MORE THAN ONE PARTICIPANT, PLEASE ENTER THEM BELOW <u>OR</u> SEND US A SEPARATE LIST TOGETHER WITH THIS REGISTRATION FORM (NAMES, DATES OF BIRTH & EMAIL ADDRESSES ARE MANDATORY).		
Family name:	First name:	
Email address:	Date of birth:	
Family name:	First name:	
Email address:	Date of birth:	
Family name:	First name:	
Email address:	Date of birth:	
Family name:	First name:	
Email address:	Date of birth:	
Family name:	First name:	
Email address:	Date of birth:	
Family name:	First name:	
Email address:	Date of birth:	
Family name:	First name:	
Email address:	Date of birth:	
Family name:	First name:	
Email address:	Date of birth:	
Family name:	First name:	
Email address:	Date of birth:	

To send the form: