

**E**uropean **A**ssociation for **F**orensic **E**ntomology

**REGISTRATION FORM TO BECOME MEMBER**

Name: -----

First name: -----

Institute/laboratory: -----

Address: -----

Country: -----

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail: -----

Website: -----

Title/Position/: -----

Background: -----

Forensic entomological experience

Number of expertise performed for the justice: -----

Number of testimonies during trial : -----

Comment/Recommendations:

/---/ I herewith wish to inform the board of EAFE that I am interested in becoming a Member of EAFE and allow the secretary to write my name and address (postal and E-mail) on the website : [www.eafe.org](http://www.eafe.org)

/---/ I read and accept the code of ethic available on [www.eafe.org](http://www.eafe.org) website

**Date and signature**