



**Leda Partenariat - Local Development Network Association**

**I would like to register as member of the Leda Partenariat - Local Development Network Association.**

**I have read the statute of the association and agree with its aim.**

Name	
Surname	
Organisation	
Postal address	
Email	
Telephone	
Skype	

..... signature

..... date

*Send the completed form by email, as scanned attachment, to: **haris\_martinos@hotmail.com***