

Additional information

## Description

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Full name(Required) \_\_\_\_\_

Vegan

Yes

No

Food restrictions/Alergies Gluten / Seafood / Fish / Peanuts / Soy / Milk and lactose / Nuts / Celery / Mustard / Sesame / Sulfur dioxide and sulfites / Lupin / Others (please, specify)

\_\_\_\_\_

Other relevant information Disabilities, mobility needs or any additional comments we should take into account.

\_\_\_\_\_

## ECMTB accompanying person

Information about the accompanying programme can be found at [Accompanying social programme](#) and you can proceed with the payment [at Payment options](#)

Will anyone come with you to ECMTB 2024?(Required) \_\_\_\_\_

The registration of accompanying persons and children attending the Kids programme is required

Yes

No

Number of ECMTB 2024 Accompanying social programme persons(Required)

\_\_\_\_\_ Full name of ccompanying person 1 \_\_\_\_\_

Full name of ccompanying person 2 \_\_\_\_\_

Submit

**Date Created**

2023/12/12

**Author**

ecmtb24