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## REGISTRATION OF INTEREST - YPOS 2024

Your Family Name - (Required)

Your First Name - (Required)

Your Preferred Name - (Required)

Date of birth - (Required)

Gender - (Required)

Male  Female

Your Home Address - (Required)

Your Country - (Required)

Your Passport Number - (Required)

Your National IPA Section - (Required)

Your IPA Membership ID - (Required)

Your Home Phone:

Your Mobile Phone: - (Required)

Your email: - (Required)

Acceptance to share data in relation YPOS 2024 with participants and organiser

Yes  No

Acceptance to photographs for IPA promotion on social media

Yes  No