POWER OF ATTORNEY

on behalf of legal entity

	20
(city)	
(full name of	he principal organization, indicating the type of business entity)
as represented by	
	(job title and full name of the principal)
acting on the basis of	
	(document establishing the authority of the principal)
harahy authorizas	
nercoy aumorizes	(full name of the authorized person)
passport number	, telephone number
to collect participant accre	ditation badges in accordance with the attached list from the
	accreditation point.
	hed (the power of attorney is not valid without a list of all l, copies of their passports, and original personal data consent
Power of attorney granted u	ntil 20
Principal signature	
	(full name of the principal)
Authorized person signature	
	(full name of the authorized person)

AFFIX SEAL HERE

List of participants to be accredited attached to the power of attorney on behalf of legal entity

(The power of attorney is not valid without a list of all participants to be accredited, copies of their passports, and original personal data consent forms)

Full name	Date of birth	Passport number
rincipal		
rincipal		/