

RECOMMENDATION FORM
for
Membership
of the
SWEDISH CHAMBER OF COMMERCE IN HUNGARY

The undersigned hereby recommend the following applicant for
Membership
of the
SWEDISH CHAMBER OF COMMERCE IN HUNGARY

Name of
applicant: _____

Recommended by:

Date

Name of SCCH member

Signature

Date

Name of SCCH member

Signature

(This recommendation form is to be given in together with the application form.)