



Gazette Subscription Application

REGISTRATION INFORMATION			
First Name:		Last Name:	
Company Name (if necessary):			
Address:		Country:	
		Zip:	
Telephone No:		Fax No:	
E-mail Address:			
SUBSCRIPTION (check the appropriate box)			
ANNUAL PRINT SUBSCRIPTION			
LOCAL	EC \$400	<input type="checkbox"/>	USD \$150 <input type="checkbox"/>
OVERSEAS	EC \$500	<input type="checkbox"/>	USD \$190 <input type="checkbox"/>
ANNUAL ELECTRONIC SUBSCRIPTION			
EC \$350 <input type="checkbox"/>		USD \$130 <input type="checkbox"/>	

Signature _____

Date _____