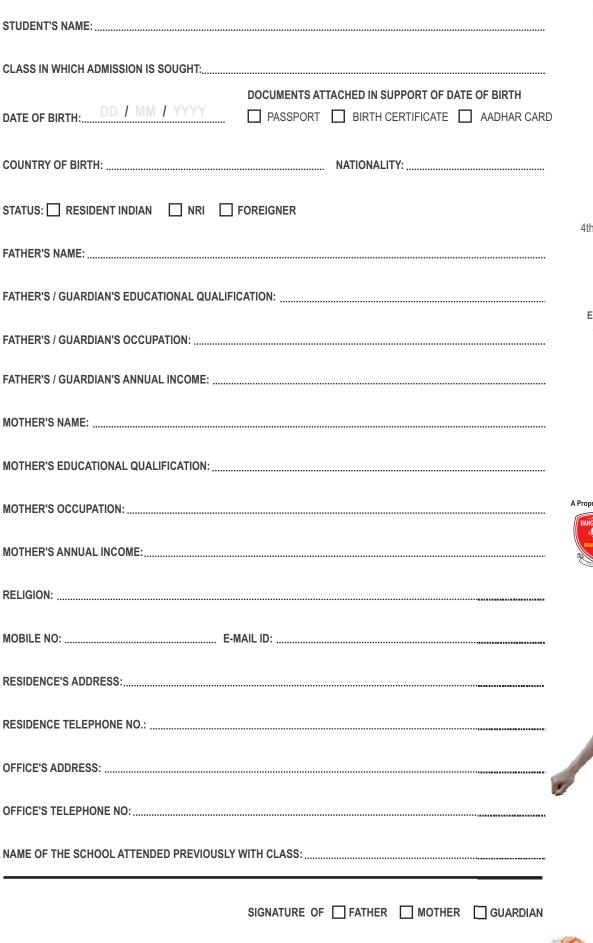
REGISTRATION FORM

DATE: DD / MM / YYYY





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