



GARNRUNDTEST (Yarn Round Robin Test) APPLICATION FORM

Please send to:

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Fax: +41 (0)44 206 42 30

Company name & adress:

Tel.:

Fax.:

E-Mail:

Contact person & E-Mail:

Billing adress (if different than above)

We would like to participate 1-time 2-times – per year in the international
Yarn Round Robin Test

Date:

Signature:

proven since 1846

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