## BSRYF – Vote delegation form

*This is the* **Vote delegation form** *for the* ***Baltic Sea Region Youth Forum (BSRYF) election meeting****. The meeting will take place on* ***19.04.2023 online****.*

*Organisations or networks, submitting a vote delegation form and eligible as an official organisation or network in accordance with the rules specified in the BSRYF guiding documents, can cast 3 votes to elect the Committee of Youth Representatives (CYR) and the organisations represented in the Steering Group, as well as all other votes cast during the meeting.*

*The signed document shall be sent to* [*youth@cbss.org*](mailto:youth@cbss.org) *prior to the BSRYF election meeting.*

**Partner information**

*This section is aimed to collect partner information about each organisation or network to evaluate the eligibility.*

Name of the organisation:

Legal status:

Address:

Website:

**Delegate information**

*This section is aimed to collect information regarding the representative of the organisation / network in the election meeting.*

Delegate first name and surname:

Organisation:

E-mail address:

Phone number:

**Legal/appointed representative information**

Name & Surname:

Role / Title:

Organisation:

E-mail address:

Phone number:

**I, the legal/appointed representative and undersigned, hereby confirm that the delegate, mentioned above, is eligible to represent our organisation in the BSRYF election meeting.**

**The organisation operates in accordance with the values of the Council of the Baltic Sea States.**

Date

Signature of legal / appointed representative

***Thank you for submitting your vote delegation form.***