**LABORATORY OR MINISTRY**

**LETTERHEAD**

 Date

Ex *officio Secretariat*

Pan American Health Organisation

World Health Organisation,

Av. Governador Leonel de Moura Brizola, 7778

25045-002, Duque de Caxias

Rio de Janeiro, Brasil

**Application for Membership in the Inter-American Network of Food Analysis Laboratories**

**Example:**

By means of this letter, the laboratory ……………………………….………………………. (name of laboratory), recognized as official laboratory under ………………………………………. (name of Ministry) of …………………………. (Country Name) applies for registration in the Interamerican Network of Food Analysis Laboratories (INFAL).

Motivation of the laboratory to join the INFAL (max. 300 words)

I declare that the information and documentation is truthful and can be used by the INFAL.

Signature

Name

Function