Proxy for the General Assembly of Doctoneuro

(to give to the General Secretary before the opening of the GA)

| I undersigned (SURNAME, Name) living in (City) |
|-----------------------------------------------------------------------------------------------|
| give proxy to (SURNAME, Name) to represent me and take part |
| of voting process in my name during the General Assembly of Doctoneuro association |
| on November 13th 2020 at Lagache Amphitheater – 12 rue Goethe 67000 STRASBOURG. |
| |
| Date and signature : |