

REGISTRATION FORM

to the electronic Extraordinary General Meeting in Brain+ A/S on **Wednesday**, 11 October 2023, at 8:00 AM

Nam	e of shareholder:		
Addr	ess:		
Posta	al code and city:		
E-ma	il:		
Cust	ody account no. / VP reference:		
Requ	est for admission to the meeting:		
	I wish to participate in the Extraordina	vish to participate in the Extraordinary General Meeting.	
	I would like to participate with compa	nion/advisor.	
Name	of companion/advisor:	Please use CAPITAL LETTERS	