

## **Application for membership**

Organization			
First name		Last name	
Address			
City		Zip Code	
Country:			
Phone		FAX	
E-mail			
Website			
Data		Signatura	
Date		Signature	
Please include			
☐ Copy of the articles of Association			
☐ Bylaws			
☐ Statement of Eligibility			
□ any	other supporting docum	entation	

**Return Application and Documents to:**