APPLICATION FOR EPoSS MEMBERSHIP

This signed document testifies that the organisation agrees to become a member of the EPoSS Association. Membership becomes effective after signature of this application form and confirmation by the EPoSS Board.

Organisation:	
Address: Street	
Postal code, City	
Country	
Main contact person:	
Position:	
Address (if different): Street	
Postal code, City	
Country	
Phone:	
Email:	
Address for invoices (if different): Street	
Postal code, City	
Country	
VAT ID:	
Contact person for invoicing:	
Phone:	
Email:	
For which type of membership are you applying?	☐ Full membership (membership fee + Chips/KDT variable fee) ☐ Programme membership (Chips/KDT variable fee)

For all new members, please tick which member category applies to your organisation:

Category	Description	Annual membership fee for full members
Category A[1]	☐ Small enterprise (< 50 employees and/or turnover ≤ € 10 m)	500 €
	☐ Medium-sized enterprise (< 250 employees and/or turnover ≤ € 50 m)	1,500 €
Category B	☐ Universities and colleges	2,000 €
	☐ Public research institutions and other research institutes	4,000 €
Category C	☐ Large enterprises, i.e. companies and groups with more than 250 employees and/or an annual turnover over € 50 m	8,000 €
Category D	☐ Clusters	4,000 €
Category E	☐ Consultancy	4,000 €

[1] The first year of EPoSS membership is free of charge for small and medium-sized enterprises (SMEs). The annual membership fee applies from the second year onward.

I am authorised to sign this application form on behalf of my organisation.
I have read and agree to the EPoSS statutes (Articles of Association, Rules of Procedure, Contribution Rules).

Signature and Organisation Seal

Location and Date