

OFFICIAL APPLICATION FOR EPoSS MEMBERSHIP

This signed document testifies that the organisation agrees to become an EPoSS Association member, to accept the EPoSS statutes, and to pay the annual membership fees.

Memberships become effective after signature of this application form and the payment of the annual fee.

Each member of the EPoSS Association will actively support the goals of the association, as outlined in the statutes.

Organisation Name:	
Address:	
Address for invoices if different:	
Contact Person:	
Position:	
Address (if different):	
Tel:	
Fax:	
E-mail:	

Member Group assignment:

A Members

Small and medium enterprise 4,000.00 €

B Members

Universities and Colleges 2,000.00 €

Public research institutions and other research institutes 4,000.00 €

C Members

Large enterprises (>250 employees) 8,000.00 €

D Members

Associations (of SMEs), number of members ≤6 members, plus 2,000.00 for each additional Member 8,000.00 €

I have been authorised to sign on behalf of my organisation.

I have read and agree to conform with the EPoSS Statutes.

Signature

Date