| C:\Users\Predieri\AppData\Local\Microsoft\Windows\INetCache\Content.Word\logo-aeneas-300dpi.jpg membership Application form | | | | |
| --- | --- | --- | --- | --- |
| Applicant Information (legal person who has the authority to sign official documents) | | | | |
| Title: | First Name: | Last Name: | | |
| Job Title: | | | | |
| E-mail: | | | Phone: | |
| company/organisation Information | | | | |
| Full Legal Name: | | | | |
| Registered Address: | | | | |
| Postal Code: | City: | Country: | | |
| Commercial Registration N°: | | | Place: | |
| VAT Identification N°: | | | | |
| Worldwide turnover in last financial year: | | | N° Employees: | |
| contact person information (if different from legal and/OR person most involved with projects) | | | | |
| Title: | First Name: | Last Name: | | |
| Job Title: | | | | |
| E-mail: | | | Phone: | |
| accounts payable information | | | | |
| Contact Name: | | | | |
| E-mail: | | | Phone: | |
| Invoicing Address (if different from legal address): | | | | |
| Postal Code: | City: | Country: | | |
| membership category (PLEASE SELECT ONE) | | | | |
| Chamber A - SME | | |  | |
| Chamber B - Research | | |  | |
| Chamber C - Corporate | | |  | |
| Associated | | |  | |
| AFFILIATION | | | | |
| I certify that (company/organisation name) is not already affiliated to an AENEAS Member. (see Article 23.4 of the AENEAS Articles of Association) | | | | |
| company/organisation description | | | | |
| Short description of your company/organisation (max. 500 characters) | | | | |
| I certify having read and approve the Articles of Association and the Internal Regulations and hereby formally request to become a member of the AENEAS association.  I, (First Name, Last Name), am authorised to sign this form on behalf of (company/organisation name). | | | | |
| Signature: | | | | Date: |