| C:\Users\Predieri\AppData\Local\Microsoft\Windows\INetCache\Content.Word\logo-aeneas-300dpi.jpgmembership 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 Organisaton  | [ ]  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) |
| REQUIREMENTS For MEMBERSHIP |
| [ ]  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.[ ]  By submitting this form we agree with the storage and handling of personal data by AENEAS, according to the [Data Privacy Policy](https://aeneas-office.org/legal-notice/) published on the AENEAS website. |
| I, (First Name, Last Name), am authorised to sign this form on behalf of (company/organisation name). |
| Signature:  | Date:       |