

GeoTLD GROUP AISBL - MEMBERSHIP APPLICATION FORM

Please complete this GeoTLD Group AISBL membership application form and send it to

GeoTLD Group AISBL Secretariat
3001 Leuven, Ubicenter, Philipssite 5/13, Belgium
Email: office@geotld.group
Phone: +32 16 28 49 70

General Information

Organisation Name	<input type="text"/>
Street Address	<input type="text"/>
Postal Code/ZIP	<input type="text"/>
City	<input type="text"/>
Country	<input type="text"/>
Phone/Fax	<input type="text"/>
Email	<input type="text"/>
Tax number or VAT	<input type="text"/>

Information about the Member

Specify membership (effective Member/Observer)	<input type="text"/>
Specify type of legal entity (government/public/private/limited/partnership/others and Register number)	<input type="text"/>

Brief description of the organisation's primary activities

GeoTLD GROUP AISBL - MEMBERSHIP APPLICATION FORM

Main Points of Contact for communication with GeoTLD

Official Representative for the General Assembly

First Name	<input type="text"/>
Last Name	<input type="text"/>
Position	<input type="text"/>
Department	<input type="text"/>
Phone	<input type="text"/>
Fax	<input type="text"/>
Mobile	<input type="text"/>
Email	<input type="text"/>

I hereby assure that we fulfill the criteria for a GeoTLD membership, that we accept the statutes of GeoTLD and will follow the rules and regulation of association including payment of membership fees at any time.

I hereby certify that the above information is true and correct and that I am a legal entity Authorized Representative/obtain Power of Attorney (*)

Date

Name

Signature & Position

Organisation Seal or Stamp

(*) Either authorized in the by-laws or commercial register to represent the entity or a valid Power of Attorney must be attached to this form