

Membership Application Form

Please return this form to: **Ivo Matser, CEO**
ABIS, Av Moliere 128, Brussels -1050, Belgium
Tel: +32 2 544 14 29
ivo.matser@abis-global.org

Membership Type: Academic Corporate

Membership Category: Partner (€ 11,000 / year) Member (€ 7,000 / year) Associate Member (€ 3,000 /year)

Contacts

Please provide the **names, titles and contact details** of the people who will serve as the legal contact (Senior Lead) and as the lead operational contact.

Senior Lead _____

E-mail Address _____

Operational Lead _____

E-mail Address _____

Data

Institution/Company/School _____

Address _____

City and Country _____

Telephone _____

Website Address _____

Number of Faculty / Students / Employees _____

Invoicing Data

Addressee _____

Address _____

City and Country _____

Telephone _____

VAT Status (and Number if applicable) _____

Declaration of Intent

I confirm the wish of my Institution / Company / School to join ABIS as a Corporate / Academic and to take an active part in its activities, networking and events. As a member / partner, I agree with ABIS' aims, its governance charter (as approved by the General Assembly on 19 October 2015) and to pay annual membership fees at the due date.

Name _____

Title _____

Signature

Date _____