

APPLICATION FORM - REGULAR MEMBER

1.- General Information

Organization: _____

Address: _____

City: _____

Country: _____ Postal Code _____

Name of President: _____

Name of General Manager: _____

Telephone: _____

E-mail: _____ @ _____

Web Page: _____

Contact person and position: _____

2.- Turnover for the last two years:US\$ _____

3.- Number of employees:

4.- Member of other Associations:

Yes

No

Specify: _____

Signature:

Position:

Date: