

## **WFNMB Membership Application Form**

Please complete the WFNMB membership application form and return it via scanned E-mail to the WFNMB permanent office (office@wfnmb.org).

Please attach to your application the following documents:

- proof of legal bylaws through testified translation
- proof of the legal entity
- letter of intention (please describe why you wish to become a member)

Society, association or group data			
Society, association	on, group name:		
Society, association:	on, group		
Number of natior	nal member (incl. Technologists): Number of Technologists:	_	
Offical socie	ety, association or group contact details		
Salutation:			
First name*:			
Last name*:			
Street*:			
ZIP:	City*:		
Country*:			
Tel.:			
Fax:			
E-mail*:			











Members of the Executive Committee as per date of application		
President name*:		
President E-Mail address*:		
President Elect name:		
President Elect E-Mail address:		
Secretary General name:		
Secretary General E-Mail address:		
Treasurer name:		
Treasurer E-Mail address:		

Your application will be evaluated by the Leadership and brought forward to the next General Assembly for approval. You will receive a letter or acceptance or rejection thereafter by our permanent office.

WFNMB Office 1060 Vienna, Austria Phone: +43 (0)1 890 44 27 Fax: +43 (0)1 890 44 27-9

E-Mail: p.neubauer@wfnmb.org

URL: www.wfnmb.org

Austrian Register of Associations: no. 627209737

Please consider the environment before printing this e-mail.

<sup>\*</sup>Please note that fields marked with a red \* are required.