

REQUEST FOR ADHESION FORM

In my capacity of (position):	
- ask to be admitted to COPEAM as	s an Active Member
- declare to have read the Associatherein, should the present demand	tion's By-Laws and to accept all the disposals included for adhesion be approved
- give his/her consent to the use of document related to the Privacy Pol	his/her personal data by filling and signing the attached licy for COPEAM Members.
Address:	
Town:	PC: Country:
Phone:	Mobile:
Fax:	Web site:
E-mail:	
I acknowledge and agree that the adhesion to the established membership fee. Any admitted Member can resign from COF Should such communication not reach the mewithdrawing Member is committed to correspond	COPEAM as an Active Member implies the obligation to honour annually PEAM after having informed the General Secretariat by registered letter. entioned Secretariat before the end of the ongoing accounting period, the ond the annual fee related to the following accounting year.
For approval	
	Date:
	SIGNATURE :

