

APUEA REGISTRATION FORM - MEMBERSHIP

WE, THE UNDER-MENTIONED ORGANISATION / COMPANY,
HEREBY APPLY TO BECOME A MEMBER

You can print out your registration
and entry form below.



1 ORGANISATION / COMPANY DETAILS:

Organization name.....

Marketing name and/or Abbreviation.....

Street

Postal code..... City..... Country.....

General Phone..... General Fax.....

General E-mail..... Web.....

Primary Contact: First name..... Surname.....

Position..... Direct Phone..... E-mail.....

2 ORGANISATION CATEGORY (please check as appropriate below):

Association / Federation

Manufacturer / Equipment Supply

NGO

Utility / Operator

Academic

Media company - Press / Journalist / Advertisement

Advisor - Financial / Legal / Banking

Building Sector

Consultancy - Engineering / Design / Technical

Other

Specify:.....

3 BILLING INFORMATION (if different from above):

Billing Address:.....

.....

.....

4 MEMBERSHIP CATEGORY (please check as appropriate below):

Member Category	Employees		
	≤ 1,000	1,000 - 10,000	≥ 10,000
Premium Member	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Corporate Member	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Affiliate Member	<input type="radio"/>		

5 PAYMENT METHOD:

Bank Transfer

Credit Card

Paypal

Please indicate preferred payment method. Payment instructions will be provided following confirmation of membership.

Please complete the form, and send a scanned version
to info@apuea.org