



Industry Alliance VHPready e.V.

Membership Application Form

Industry Alliance VHPready e.V.

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Completed by Industry Alliance VHPready e.V.

Member ID

-							

Date of entry (month / year)

-						

Membership (select appropriate membership level, see membership rules)

Full Member				Associated Member (Association, Freelancer)
Supporting Member	Contributing Member	Adopting Member	Public Research Organization / University	

Annual Revenue (AR; before tax in Mio EUR, except public research organizations / universities)

AR >= 2.000	1.000 <= AR < 2.000	250 <= AR < 1.000	50 <= AR < 250	5 <= AR < 50	AR < 5

company institution	country
company form	URL
street, number	zip city
telephone	fax
e-mail	mobile phone

Invoice address (if different from above)

Note: The annual fee is payable after invoicing.

name	function	address
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I accept the membership conditions of the Industry Alliance VHPready e.V. and I am authorized to sign:

name	function	signature	city	date
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Representative (holder of voting rights)

Mr. Mrs.	academic title	function
last name	name	
telephone	fax	
e-mail	mobil phone	
signature of representative	city	date