

REQUESTING MEMBER FORM

1. 9	General Information
Ар	plicant Name:
Org	ganisation Name:
Org	ganisation Address:
Cit	y: Country:
Ro	le/ Title in organisation:
Eu	ro-IX Membership Type:
	Standard Associate Remote Not Applicable
	Funding Information case state the reasons for funding request:
	imate funding required (please state in EUR currency):
	ner transport:
	scellaneous costs i.e. VISA costs (please state):

3. <u>VISA Information</u> Do you require a VISA to attend the forum:					
			□ Yes		
□ No If YES, please state: Passport number: Passport issuing city and country:					
			Nationality:		
			Passport start date and end date:		
			Please attach a coloured copy of your passport to the application to facilitate a visa letter 4. Bank Information for Reimbursement		
IBAN: BIC:					
Bank Name and Address:					
Fellowship Policy					
☐ I hereby certify that I am the owner/legal represent information given on this application is true and correct.	tative of the above organisation and that all the				
☐ I understand and agree to a one year Euro-IX Remote Membership after successful attendance to the Forum. The above organisation agrees with the <u>Articles of Association</u>					
☐ If accepted, I understand that my organisation as a be re-apply after a minimum interval of 2-years.	neficiary of the Fellowship, will only be eligible to				
Name of Signatory:	Location:				
Title of Signatory:	Date:				
Signature:					