

APPLICATION FOR MEMBERSHIP

Our General Assembly Meeting/Executive Committee Meeting of			
		Name of Consular Body	
		Address (Street)	
Address (Postal)			
Telephone			
Telefax			
Email			
Name of President			
Name of Secretary General			
Names of other Members of the			
Executive Committee			
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Number of Members of the Committee			
Signed by			
Place	Date:		

Annex: List and contact information of the Individual Members of the Corps/Associations