**Demand of Membership**

Country

Motivation of demand

**Identification of represented association**

Name

Address

Mobile phone

Email

Homepage

Name of the President

**Delegate**

Name

Address

Mobile phone

Email

Photo (please attach a photo)

**Members in the EFP working groups**

|  |  |
| --- | --- |
| Name:      Address:      Mobile phone:      Email:       | Name:      Address:      Mobile phone:      Email:       |

|  |  |
| --- | --- |
| Name:      Address:      Mobile phone:      Email:       | Name:      Address:      Mobile phone:      Email:       |

**Proposal to yearly subscriptions amount** EUR

September 2021