

Application for membership

Country _____

Company _____

Applicant Mr. Mrs./Ms.

First Name _____

Last Name _____

Position/Title _____

Address _____

ZIP/Postal code City _____

State/Province Country _____

Phone Fax _____

E-Mail _____

Homepage _____

Declaration

The undersigned(s) approve herewith, fully aware of the bylaws of FEPE International, the accession on FEPE International as

Affiliate Member, Supplier / Annual subscription EURO 2000.00

Authorised signature

Name _____ Position/Title _____

Place and date _____

Please return this request for membership to **FEPE International**,
c/o Mark Flys, 13 First Ave, Amersham, Bucks HP7 9BJ, United Kingdom

or by Fax +44 1494 581777, E-mail: info@fepe.com, <http://www.fepe.com>
Bank: UBS AG, CH 3000 Bern (Switzerland), IBAN Code: CH37 0025 7257 GP10 5516 1,
BIC: UBSWCHZH80A