

## APPLICATION FOR MEMBERSHIP

<b>NAME OF THE APPLICANT</b>	
<b>ADDRESS</b>	

### LEGAL FORM

Type of Structure:

Date of Foundation/Registration:

### APPLICANT MEMBERS

Type of Organization:

Conditions to become a member:

List of Members:

### APPLICANT BOARD

Number of Board Members:

Election conditions:

### SUMMARY OF ACTIVITIES:

### REPRESENTATIVE DETAILS

PROPOSED EUCROF REPRESENTATIVE 1	PROPOSED EUCROF REPRESENTATIVE 2

### Reserved for EUCROF

**I confirm that the above CRO Association is conform to EUCROF bylaws and therefore is accepted as a new member of EUCROF.**

**Date:**

**President**

**Vice-President**