

# ORGANISATIONAL MEMBERSHIP SUBSCRIPTION FORM

Your FEDORA membership is valid for one year as of the day of the receipt of your membership payment.

Name of the organisation:

Address:

Postal Code:

Country:

Website address:

City:

General phone number:

Please indicate how the name of the organisation should be featured in the FEDORA on- and offline communications:

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Please send us the logo of your organisation as a png transparent file via e-mail to [services@fedora-circle.com](mailto:services@fedora-circle.com)

## ORGANISATION'S REPRESENTATIVE

Title (Mr/Mrs/Ms, Dr...):

Name:

First name:

Function:

Phone number:

Mobile number:

Email address:

Language preference:

## KEY CONTACT PERSON

Title (Mr/Mrs/Ms, Dr...):

Name:

First Name:

Function:

Phone number:

Mobile number:

Email address:

Language preference:

## Membership category

- Affiliate € 500 /year
- Associate € 1,500 /year
- Full Member € 3,500/year

## Payment method

- By bank transfer: Please send us via email a request for our bank details.
- By credit card: Card type (VISA, Mastercard or AMEX):  
Name of credit card holder:  
Credit card number:  
Expiration date:  
Security code (3 or 4 digits):
- By check: Payable to FEDORA - Palais Garnier - 8, rue Scribe - 75009 Paris - France
- I declare that the information provided on this form is true and complete to the best of my knowledge and belief.

Date (DD/MM/YYYY):

Signature:

Please return this filled in and signed form to FEDORA - Palais Garnier - 8, rue Scribe - 75009 Paris - France or scan it and send it to [services@fedora-circle.com](mailto:services@fedora-circle.com)

If you have any questions, please contact:  
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