



Membership Application for Individual Membership

I hereby apply for the following individual membership at Eyes & Ears of Europe - Association for Design, Promotion and Marketing of Audiovisual Media e. V.:

- | | |
|---|------------|
| <input type="radio"/> Single person | € 590 p.a. |
| <input type="radio"/> Pensioners (Proof required) | € 90 p.a. |
| <input type="radio"/> Job seekers (Proof required) | € 90 p.a. |
| <input type="radio"/> Students/Trainees (Proof required) | free |
| <input type="radio"/> Additional registered member for CM3-6 | € 590 p.a. |

for

Name, First name

if apl. company &
position

Street

City, Postcode

Country

eMail

Phone

Fax

Date of birth

The membership fee will be paid to the account of Eyes & Ears of Europe e. V. after receiving the invoice. There is no admission fee.

I have read the statutes and the rules of membership fees and hereby fully accept them in their current version. I have read the [Privacy Policy](#).

City

Date

Signature