



Eyes&EarsEurope

## Membership application for universities and institutions

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

- |                                                                         |                   |
|-------------------------------------------------------------------------|-------------------|
| <input type="radio"/> <b>Non-profit universities &amp; institutions</b> | <b>€ 550 p.a.</b> |
| <input type="radio"/> <b>Private universities &amp; institutions</b>    | <b>€ 825 p.a.</b> |

for

**University/Institution:** \_\_\_\_\_

### Address

Street	_____
City, Postcode	_____
Country	_____

**represented by**

**and**

Name, First name	_____
Position	_____
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](#). I also have the consent of the persons whose personal data I am registering for the membership.

City

Date

Signature

\_\_\_\_\_