

Recipient
INSTITUT DER REGIONEN EUROPAS
Verein zur Förderung des Institutes der
Regionen Europas (IRE)
Franz-Josef-Kai 1
A-5020 Salzburg
Telefax: +43 – 662 – 84 32 88 – 5050

(Sender)

MEMBERSHIP DECLARATION

I/we hereby accede to

the "***Verein zur Förderung des Institutes der Regionen Europas (IRE)***"
as a member.

With my/our accession I/we acknowledge the statutes (in accordance with a decision of the Federal Police Authority of Vienna, Office for Association, Assembly and Media Law Matters, Schottenring 7-9, A-1010 Vienna, Austria, dated 13 October 2004 and in accordance with Section 13 subsection 2 *Vereinsgesetz* (Clubs and Associations Act) 2002, Official Journal of Federal Law no. 66/2002). I/we hereby request acceptance as a member in the above-mentioned association. I/we support the purposes outlined in the above-mentioned statutes under II. and III. and the intended activities of the association with the annual fee of

- 500 Euros (for local authorities)
- 1,000 Euros (economic enterprises and other people)

Name of the county, town or company

Representative or authorised signatory (surname, forename, function, title)

Postal address or business address

Telephone and fax number with dialling codes (including state and area codes)

Email address

Payment of membership fee of _____ Euros will be made by a transfer to the account of the "***Verein zur Förderung des Institutes der Regionen Europas (IRE)***".

IBAN: AT85 4501 0000 1510 1199 **BIC:** VBOEATWWSAL (account no.: 15101199 with the Volksbank Salzburg, Sort code: 45010)

Date: _____ Signature and stamp: _____