

LU-CIX a.s.b.l. | Application form

Requester:

*Name:

*E-mail address:

*Phone number:

General information:

*Organization name:

*URL homepage:

Chamber of commerce reg. no.:

*Organizational e-mail:

*Telephone number:

Fax number:

*Address:

*City:

*Postal (ZIP) code:

Category applied:

Classic (EUR 2.000)

Supporter:

Gold (EUR 2.500)

Platinum (EUR 5.000)

Diamond (EUR 10.000)

Comments:

By signing this application form, I confirm to have read and to hereby accept without any restriction the documents of LU-CIX a.s.b.l. titled „statuts – version consolidée” (articles of incorporation – consolidated version) and „Member Guide”.

Name:

Title (if applicable):

Date:

Stamp (if applicable):