

LU-CIX ASBL | Application form (Page 1/2)

Requester	General information	
*Name:	*°Organisation name:	
*E-mail address:	*°URL homepage:	
*Phone number:	*°Organisational e-mail:	
	*Phone number:	
	*Company registration number or assimilated:	

*E-mail address of the person attending the LU-CIX' General Meeting:

*E-mail addresse(s) of the person(s) receiving general LU-CIX' community information:

*E-mail addresse(s) of the person(s) receiving LU-CIX' marketing information:

E-mail addresse(s) of the person(s) receiving LU-CIX' sales leads:

Legal address	Postal address (if different from legal address)	
Legal address 1:	Legal address 1:	
_egal address 2:	Legal address 2:	
City:	City:	
Postal (ZIP) code:	Postal (ZIP) code:	
Country:	Country:	
Billing address (if different)	Billing contact person	
Invoice organisation:	Honorific: Mr Mrs	
Invoice address 1:	*Name:	
Invoice address 2:	*Phone number:	
City:	*E-mail address:	
Postal (ZIP) code:		
Postal (ZIP) code: Country:		



*°Member package categories:

Membership with Classic package (EUR 2.000 per year) Membership with Gold package (EUR 2.500 per year) Membership with Platinum package (EUR 5.000 per year) Membership with Diamond package (EUR 10.000 per year)

Comments:

*: Mandatory field.

°: Information can be published on the LU-CIX website.

By signing this application form, I confirm to have read and to hereby accept without any restriction (i) the documents of LU-CIX ASBL titled "statuts – version consolidée" (articles of incorporation – consolidated version) and "Members Guide"; (ii) the LU-CIX ASBL General Terms and Conditions which form an integral part of this contract.

Date:	Date:
For requester	For LU-CIX ASBL
*Name:	Name:
*Signature:	Signature:

www.lu-cix.lu