

## Requester

\*Name:

\*E-mail address:

\*Phone number:

## General information

\*\*Organisation name:

\*\*URL homepage:

\*Organisational e-mail:

\*Phone number:

\*Company registration  
number or assimilated:

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

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

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

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

## Legal address

\*Legal address 1:

Legal address 2:

\*City:

\*Postal (ZIP) code:

\*Country:

## Postal address (if different from legal address)

Legal address 1:

Legal address 2:

City:

Postal (ZIP) code:

Country:

## Billing address (if different)

Invoice organisation:

Invoice address 1:

Invoice address 2:

City:

Postal (ZIP) code:

Country:

## Billing contact person

Honorific:    Mr        Mrs

\*Name:

\*Phone number:

\*E-mail address:

## Billing information

VAT number:

PO number:

**\*\*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)

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**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:

**For requester**

\*Name:

\*Signature

:

Date:

**For LU-CIX ASBL**

Name:

Signature: