

Application for Membership

Please complete this form and hand it over personally to the membership chairperson.

Applicant

 Name

 Nationality

 Date of Birth

 Profession

 Street, Number

 ZIP Code, City

 Telephone

 Mobile

 Email Address (the monthly program will be sent to this email address)



Further information

How did you hear about the MetClub?

What are your main reasons for joining the club?

Which MetClub events have you attended already?

Which MetClub event(s) do you plan to organize (or have organized already)?

Remarks or comments:

Signature

I have read the club's constitution and by-laws and understand that, as a member, I will have to actively support its aims and activities. I agree to organize at least one program per year.

For use by membership chair:

Remark

 Date Signature

 Date Signature

