

# MEMBERSHIP APPLICATION FORM

valid from 01/01/2015, as of 01/14/2015



<input type="checkbox"/> Individual Membership Application fee (one-time): 60 Euro  <input type="checkbox"/> Individual Membership reduced fee* Application fee (one-time): --- Euro	<input type="checkbox"/> Company Membership <input type="checkbox"/> up to 5 members <input type="checkbox"/> up to 10 members Application fee (one-time): 60 Euro  (Please enclose the company membership registration form for persons)	<input type="checkbox"/> University Membership Application fee (one-time): 60 Euro  (Please enclose the university membership registration form for persons)
For countries which have joined the EU since 01/01/2004**		
<input type="checkbox"/> Individual Membership Application fee (one-time): 60 Euro	<input type="checkbox"/> Company Membership Application fee (one-time): 60 Euro  (Please enclose the company membership registration form for persons)	<input type="checkbox"/> up to 5 members <input type="checkbox"/> up to 10 members
<b>You can find the current list of the membership fees and the articles of tekomp Europe on our WebPortal at <a href="http://www.tekom.eu/downloads">www.tekom.eu/downloads</a>.</b>		

**Are you a student, trainee, volunteer or participant at a tekomp-accredited educational institution?**

Then please use the membership application for students, trainees, volunteers or participants in advanced training programs at tekomp-accredited educational institutions.

## I. Postal Address

Ms.  Mr.

Title/First Name/Last Name\*\*\*

Street/Number/P.O. Box\*\*\*

If postal address is the same as the company address, please fill in the following fields:

City/Postal Code/Country\*\*\*

Email\*\*\*

Company Name 1

Phone

Company Name 2

Fax

Department

## II. Invoice Address if different, please fill in:

Line 1

Line 2

Street/Number/P.O. Box

City/Postal Code/Country

Order Number of Your Company

**Please note:** If your membership fee is paid by your company, this application form must be signed below by the person in charge.

Place/Date

Company Name

Name

Department

Signature + Company Stamp

### Member recommendations:

I was recommended by (First Name, Last Name)

tekomp Europe Membership Number

\* Unemployed and retired persons pay a reduced membership fee provided they submit a certification with the application form.

\*\* Countries which have joined the EU since 01/01/2004 and Turkey.

\*\*\* **Required fields;** must be filled in.

Period of notice: 3 months from the end of the respective calendar year.

### III. Consent

I hereby declare that the details given in this membership application are true, and hereby also request membership in the European Association for Technical Communication – tekomeurope e.V. (referred to hereinafter as: tekomeurope) for myself/for the company or institution of higher learning that I represent, as per the details mentioned at the outset. Furthermore, on signing this application, I make the following declarations concerning myself or for the company/institution of higher learning that I represent:

1. I acknowledge the articles of association as binding. The articles of association are available on the tekomeurope WebPortal. The same is applicable to the resolutions passed by the committees of tekomeurope and other guidelines for cooperation, such as the code of conduct and the rules of compliance from tekomeurope.
- 2. I consent to the details specified by me, as well as those that may be provided in the future, being stored in the tekomeurope Deutschland/tekomeurope member database (referred to hereinafter as: data) for the duration of the membership, and used by tekomeurope in managing the association and for the internal organization of the association, such as sending election-related documents, announcements of association events and advertising services for members, or invitations to the meetings of country organizations. I will receive the association’s internal announcements by email and occasionally by mail. My consent includes the use of data by tcworld GmbH, service provider for tekomeurope, when this is necessary for the provision of services.**

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Place, Date

Signature of the Applicant\*

- 3. Until I explicitly revoke consent, which is possible at any time, I agree to receive further notifications of new tekomeurope publications, invitations to upcoming events, conferences (such as, for example, the tekomeurope conference), and training programs from tekomeurope Deutschland/tekomeurope and tcworld GmbH, event service provider for tekomeurope Deutschland/tekomeurope, also by mail, email or phone. Until such revocation, I consent to tekomeurope Deutschland/tekomeurope and tcworld GmbH using my data for the purposes listed above. I may send a revocation of consent at any time to tekomeurope at the contact information listed below. My data will not be given or sold to third parties.**

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Place, Date

Signature of the Applicant

### IV. SEPA Direct Debit mandate (only possible with EU bank accounts)

If a SEPA Direct Debit is authorized, a fee reduction in the amount of 5.00 Euro will be granted. However, SEPA Direct Debit may not yet be possible at every bank in Europe. Please make sure that your bank offers this service. The membership fee is due at the beginning of the calendar year. The amount will be billed at the beginning of every February. The SEPA Direct Debit mandate can be canceled by me at any time. I hereby authorize tekomeurope to withdraw the amount of the membership fee from my account according to the applicable fee list until such cancellation.

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Name of the Bank

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IBAN

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BIC

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Account Holder (First Name, Last Name)

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Place, Date

Signature of the Applicant\*\*

\* Signature is required for tekomeurope membership.

\*\* Signature is required for payment by SEPA Direct Debit mandate.

Title/First Name/Last Name

Company Name and Address

## V. Details about Your Occupation (optional)

### Your Position in the Company:

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Managing Director  | <input type="checkbox"/> Team Leader     | <input type="checkbox"/> Specialist                          |
| <input type="checkbox"/> Head of Department | <input type="checkbox"/> Project Manager | <input type="checkbox"/> Assistant                           |
| <input type="checkbox"/> Self-employed      |  | <input type="checkbox"/> Own Company with salaried employees |
| <input type="checkbox"/> Teacher/Professor  |  | <input type="checkbox"/> Other:                              |

### Industry Sector in Which You Are Active (check only one box please):

We need your industry sector to be able to address you in an industry-specific manner.

#### A. Products

<input type="checkbox"/>	01	Chemical, pharmaceutical and biotechnological products; goods made of rubber and synthetics
<input type="checkbox"/>	02	Manufacturing of food items and semiluxury food

#### B. Plants, machinery, devices, production technology

<input type="checkbox"/>	03	Machine tools and tooling machines; special mechanical engineering; manufacturing systems; drive and forwarding technology; industrial tools (incl. electrical tools)
<input type="checkbox"/>	04	Construction of large plants and power systems
<input type="checkbox"/>	05	Engine and control technology; robotics; automation; electrical motors; testing and measurement equipment; electronic systems
<input type="checkbox"/>	06	Combustion motors; turbines; ovens; burners
<input type="checkbox"/>	07	Sanitary technology; building and industrial armatures
<input type="checkbox"/>	08	Heating and cooling technology; fuel cells; pumps; compressors; pressure equipment
<input type="checkbox"/>	09	Medical equipment (incl. electromedical applications); laboratory equipment; orthopedics
<input type="checkbox"/>	10	Optical devices
<input type="checkbox"/>	11	Defense and military technology; weapon systems; marine technology

#### C. End-user devices

<input type="checkbox"/>	12	Domestic appliances; devices and tools for household handicrafts (electrical as well as non-electrical)
<input type="checkbox"/>	13	Consumer electronics (including audio and video devices and their components, radio, television, telecommunication, mobile telephones); office devices (including printers, scanners, photocopying machines)

#### D. Electrical and electronics

<input type="checkbox"/>	14	Installations and equipment for electronic data and information processing (hardware, peripherals); messaging and communications technology
<input type="checkbox"/>	15	Electronic and electromechanical components and modules; switching devices; electronic control systems and regulators; electro-installations; lighting and illumination technology, fallback systems

#### E. Automobiles and aircraft

<input type="checkbox"/>	16	Automobile engineering (powered vehicles, commercial vehicles, construction vehicles, farming and special vehicles, equipment)
<input type="checkbox"/>	17	Suppliers to the automobile industry
<input type="checkbox"/>	18	Aerospace technology

#### F. Software

<input type="checkbox"/>	19	Software development (data processing, databases)
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#### G. Retail, banking and insurance

<input type="checkbox"/>	20	Organization, IT consulting, training in banking and insurance
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#### H. Public administration

<input type="checkbox"/>	21	Organization, IT consulting, training in commerce and public administration
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#### I. Services

<input type="checkbox"/>	22	Creating technical documentation (authoring, graphic design, composition, layout)
<input type="checkbox"/>	23	Foreign language translation
<input type="checkbox"/>	24	Printing services; publishing
<input type="checkbox"/>	25	Engineering services
<input type="checkbox"/>	26	Other services for technical documentation (including software consulting; data processing services, CE-label and certification; risk analysis, certification)

#### J. Basic and advanced training

<input type="checkbox"/>	27	Private providers of basic and advanced training
<input type="checkbox"/>	28	Publicly funded colleges and universities, including college teachers
<input type="checkbox"/>	29	Private commercial schools and vocational schools, including teachers
<input type="checkbox"/>	30	Students (school or college level)

#### K. Others (please indicate the sector)

<input type="checkbox"/>		
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