

Application for membership

I/We request the admission as member/sustaining member of the association women in ip e.V. I am/We are aware of the statutes of the association and I/we agreed with the statutes (please delete inapplicable subject matter).

Title, name, first name	Company, Position
Street and number	ZIP code, city, country
Telephone (office)	Email (office)
Telephone (private)	Email (private)

Type of membership

Regular member - min. EUR 120,00 p.a. (natural person) My annual contribution: EUR _____

Supporting member (entity or association of persons or natural person)

a) Companies (industry)	b) Patent attorney firms, law firms
<input type="checkbox"/> less than 100 employees min. 1500,00 p.a.	<input type="checkbox"/> less than 10 attorneys min. EUR 1500,00 p.a.
<input type="checkbox"/> 100 to 500 employees min. EUR 2500,00 p.a.	<input type="checkbox"/> 10 to 25 attorneys min. EUR 2500,00 p.a.
<input type="checkbox"/> 501 to 2500 employees min. EUR 3500,00 p.a.	<input type="checkbox"/> more than 25 attorneys min. EUR 3500,00 p.a.
<input type="checkbox"/> more than 2500 employ. min. EUR 5000,00 p.a.	
Annual contribution: EUR _____	Annual contribution: EUR _____

_____ place, date

_____ signature

Please send the complete form either

By post to: women in ip e.V, Hermann-Schmid-Str. 10, D – 80336 Munich

Via Facsimile: +49-89-76 75 73 38

Via Email: welcome@women-in-ip.de