Membership Application Form A1



Application for Membership

Type of Proposed Membership:

	(a) Corporate Member	[]
	(c) Associate Member	[]
	(e) International Member	[]
	(f) Student Member	[]
Name of proposed Member:		
Company:		
Address:		
Phone:		
E-mail:		

Optional Privacy requests:

I consent to be publicly listed as an APTMA member on the APTMA.ie website	
I consent to my contact details being publicly listed on the APTMA.ie website	

Proposers (must be Ordinary Members)

1.

Name

Signature

2.

Name

Signature

Date:

Signature of Applicant

How are you eligible to become a member?

(See Section 3(a) – 3(i) of APTMA's Rules for guidance. See: aptma.ie/rules).

To be sent to the Secretary of the Association info@aptma.ie