

Membership Application

Personal details

First name:	Last name:
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Professional details

Organisation (to appear in the list of members)	
Job title and description	
E-mail*:	Website:

*all correspondence from SEAP is by email

Invoicing information

Organisation: (full legal name)	
Invoice address:	
City/town:	Postal code:
Country:	
VAT number:	

I agree with this declaration (Yes/No)

Date:

"I wish to become a member of SEAP in my personal capacity and agree to pay the annual membership fee for joining the Society. I understand that future fees levels will be determined by the membership in function of agreed activities."

"I undertake to participate in the Code of Conduct training programme during my first year of membership."

"I have no record of criminal or unprofessional behavior."

"I understand that the SEAP Board reserves the right to consider or revoke membership on the basis of a more detailed consideration."

"I have read and comply with the terms of membership as set out in Articles 3 & 7 of SEAP statutes. I hereby adhere to the Code of Conduct of SEAP."