



Place and Date:.....

MEMBERSHIP APPLICATION FORM

I / We hereby apply for the membership in the Polish-Israeli Chamber of Commerce:

Company:
 Address:
 Phone number: Fax number:
 e-mail: Website:.....
 VAT Registration number: National Court Registration number:.....

Number of employees:
 Type of activity:

Data of the person representing the company in the Chamber:

Name: Surname:
 Position: Phone number:
 e-mail:

Data of the person assigned to contact with the Chamber:

Name: Surname:
 Position: Phone number:
 e-mail:

What kind of events would you, as a member of the Chamber, be interested in?

Type of event:	YES	NO
Fairs / Conferences / Congresses		
Foreign delegations / Economic missions		
Cultural events / Picnics		
Training sessions		
VIP meetings		
New members presentation during cyclical members meetings		
Other(examples):		

- I agree to receive information from the Polish-Israeli Chamber of Commerce electronically in accordance with the requirements of the Act on electronic services (Act dated, 18.07.2002). This consent is necessary because the Polish-Israeli Chamber of Commerce informs its members about the statutory activities primarily electronically.
- I consent to the processing of my personal data (including address, name, position and email address) by the Polish-Israeli Chamber of Commerce in the database of the Chamber. I have been informed of the right to inspect their personal data and correct them and a right to request for them to be removed from the database in accordance with the Law dated 29.08.1997 on the protection of personal data.
- I have read the statute of Polish-Israeli Chamber of commerce.

In the name of the company:

Company's stamp:

Authorized signature:

