

NICOLE membership Registration Form

Dept.:	
City:	
	City:

I / My organization will become a member of NICOLE and agree on:

- the structure and management arrangements of NICOLE (copy can be found on the website).
- the terms and conditions of the NICOLE membership as mentioned on the website.
- having my registration details or those of people in my organisation (name, contact details, expertise and interests) made available to other NICOLE members and inclusion of these details in electronic data storage which will be used by the NICOLE Secretariat and Information Manager.
- That my organisations web link and my e-mail address can / cannot be shown on the NICOLE web site under Members' links. (Please delete as applicable, no mark will be taken as "can".)

I will participate in NICOLE as:

- 0 An academic a.
- 0 b. A representative of a non profit organisation
- 0 A representative of an industrial company C.
- Ο A technology developer / service provider company d.
- e. Ο A Micro organization: 1-9 employees
- 0 A SME organization: 10-249 employees f.
- A representative of a trade association 0 g.

Declaration for participants in the categories a and b: O I agree to pay an annual fee of € 200,00 exclusive of VAT to participate in NICOLE (or € 100,00 for East European countries). Membership is on personal level.

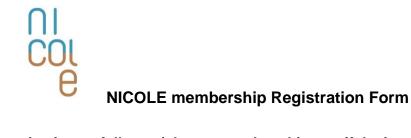
Declaration for participants in categories c and d and g: O I agree to pay an annual fee of \in 4.000,00 exclusive of VAT to participate in NICOLE (or \in 2.000,00 for East European countries). Membership on company level.

Declaration for participants in category e: O I agree to pay an annual fee of € 500,00 exclusive of VAT to participate in NICOLE (or € 250,00 for East European countries). Membership on company level.

Declaration for participants in category f:

O

I agree to pay an annual fee of \in 2.000,00 exclusive of VAT to participate in NICOLE (or \in 1.000,00 for East European countries). Membership on company level.



Please invoice my organisation as follows: (please complete this part if the invoicing address is different from the address above):

Ref. number / Purchase Order number:

Address:

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Name and contact det	ails of me or of one person in my organisation can be made available on the
NICOLE Website:	
O ves. name	e-mail address:

website..... O no

Authorised by:	Name	Date:
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Signature

Please return this form to Mrs Chayenne van Dijk, NICOLE Secretariat, PO Box 28249, 3003 KE Rotterdam, the Netherlands, email: chayenne.vandijk@nicole.org