



EANM Corporate Membership*

Application Form 2023

Please return the completed form to the EANM Executive Office by mail (o.joachimsthal@eanm.org) – membership invoice / payment confirmation will be sent.

1. Type of Membership: Corporate Member (EUR 5,000.00)

2. Company Details

Company name	
Street	
ZIP Code	City
Country	Phone
Fax	E-Mail

3. Contact Person / Billing Address

Prof. Dr. Mrs. Ms Mr. Other title

First name	Tax/VAT No.
Family name	
Institute	
Department	
Street	
ZIP Code	City
Country	Phone
Fax	E-Mail

Date

Signature

* The deliberate decision not to continue the Corporate Membership suspends the possibility for Corporate Membership application for 24 months.