

Section 1

Profession:

Legal representative for legal person:

IUS Cooperativum

An international association of co-operative lawyers

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IUS COOPERATIVUM MEMBERSHIP APPLICATION FORM

Section 1.
(To apply for membership, please fill in the gaps with your information)
First name:
Surname:
Nationality:
Domicile:
Date of birth:
Postal address:
Email address:
Phone number:
Skype ID:

Section 2.

- a. I apply for membership to IUS Cooperativum ASBL, registered in Luxembourg, registration n°F12373, registered office at Schifflange.
- b. I shall comply with the Statutes of the association. They may be consulted at the IUS Cooperativum official website (https://iuscooperativum.org/about/) in English and in French. Only the French version is the authentic one.
- c. I accept to be contacted by email and will consider this communication as valid for the functioning of the association.
- d. I accept that my personal data are integrated in a database for the functioning of the association. IUS Cooperatiyum will not share these data to any person without my consent.
- e. I have been informed that, based on the General Assembly's decision the annual fee for membership for the year 2020 is 50 euros (or 55 USD) for natural persons and 500 euros (or 553 USD) for legal persons.

Place:

Date: / /2022

Signature: