

Application for Membership

(Organizational membership)

Name of the organization

In original language:

In English

Acronym:

Address

Country:

Organization’s telephone:

Organization’s email:

Organization’s website:

Legal representative

First name: Sir name:

Salutation:

Position/title:

Work Email:

Work Telephone:

Contact person in ECDN matters

First name: Sir name:

Salutation:

Position/title:

Work email:

Work telephone

Type of organization:

Aims and activities of the organization:

TYPE OF ORGANISATION: Other (please indicate):

IF OTHER (PLEASE INDICATE):

SIZE OF THE ORGANISATION:

AIMS AND ACTIVITIES OF THE ORGANISATION:

Size of the organization:

In how far does your organization contribute to fight over indebtedness and/or to promote financial inclusion:

Expectations

Please let us know in which way and to what degree your organization plans to contribute to the work of the ECDN:

How did you hear about the ECDN?

Application declaration

I hereby declare that the applicant organization is not bankrupt or being wound up, has the operational capacity and the operational resources (technical, management) to successfully participate as an active member in the ECDN, accepts the statues and internal rules of the ECDN and supports its specific purpose, and is active in the field, listed in article 2 of the ECDN statues.

Signature and official stamp of the applicant:

Date: