

MEMBERSHIP APPLICATION

Applicant details and contact information:

Please use CAPITAL LETTERS and place an 'X' in the appropriate boxes below

Name:	Mr / Mrs / Ms:		
Organisation:			
V.A.T. Number:			
Mailing Address:			
City:			
Country:			Post Code:
Tel:			Fax:
Email:			Website:
Choice of communication by:	Fax: <input type="checkbox"/>	Mail: <input type="checkbox"/>	Email: <input type="checkbox"/>
Business Activity*:			

**if a Marina / Yacht Harbour / Port de Plaisance: please also complete the information on the back of this form*

Membership Categories and Fees:

1. Active Member:	MC1: 100 € per Marina and Year (Min 500 € Max 3,000 €) MC2: 1,500 per year
<input type="checkbox"/> MC 1:	National Marina Federation/Association within a EU country
<input type="checkbox"/> MC 2:	Marine Management Group/Co. or a National Marina Federation/Association within a NON EU country
2. Marina / Yacht Harbour Facility:	1 € per berth/mooring (minimum 200 € maximum 600 € per year)
<input type="checkbox"/> MC 3:	A single Marina/Yacht Harbour within a EU or NON EU country without a National Federation/Association of Marinas.
<input type="checkbox"/> MC 4:	A single Marina/Yacht Harbour within a EU or NON EU country with a National Federation/Association of Marinas which is NOT an active member of Euromarina.
3. Marina Facility Member:	75 € per year
<input type="checkbox"/> MC 5:	A single Marina already a member of an Association which is a member of Euromarina
4. Professional Member:	MC 6: 1,500 € per year MC 7: 500 € per year
<input type="checkbox"/> MC 6:	Suppliers to the Marina Industry
<input type="checkbox"/> MC 7:	Marina related individual Professionals

Payment Method:	VISA: <input type="checkbox"/>	MASTERCARD: <input type="checkbox"/>	BANK CHEQUE: <input type="checkbox"/>
Card No:	<input type="text"/>	<input type="text"/>	Security No: <input type="text"/>
Name on Credit Card:			Expiry date: __/__/__

<input type="checkbox"/>	Electronic Bank Transfer to:	Euromarina, BNP-PARIBAS. IBAN No: FR76 3000 4005 3800 0100 9806 313
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Signature:	Date:
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Please mail or fax your application to:

EUROMARINA NETWORK

Please use CAPITAL LETTERS and place an 'X' or write in the appropriate boxes below

Marina / Yacht Harbour Name:

Lat: Long: Marina Town / City:

Mailing Address:

City:

Country:

Post Code:

Tel:

Fax:

Email:

Website:

Marina Manager's Name:

We are members of the following Marina Association:

Berthing / Mooring Facilities

Total No. Berths / Moorings: Visitor Berths / Moorings: Max. Berth Length: m

Type and number of Berths / Moorings

< 10m: 10,1m - 15m: 15,1m - 18m: 18,1m - 20m:
20,1m - 24m: 24,1m - 30m: 30,1m - 45m: > 45m:

Berth services for the boats

Water: Electricity. 220v: 380v: Max. Amp: Socket / Amps:
Fuel Supply. Diesel: Gasoline: Pump-out. Sanitary: Bilge: Wifi: Tel: TV:

Boatyard Facilities

Boat Hoist: mt Max. Boat Beam: m Crane: mt Forklift: mt Repairs:

Other Services

Yacht Club: Swimming Pool: Showers / Toilets: Shops: Chandlery:
Restaurants: Bars: Other Services of Interest:
Hard Standing: m² Dry Stack Storage: No. boats: Max. Boat Length: m

As a member of Euromarina, I am in agreement that the above information be placed on the Federation's website:
www.euromarina.org

Signature:

Date:

Please mail or fax your application to:

EUROMARINA, 17 Rue Henri Bocquillon, 75015 Paris, France
Tel: +33 (0)1 40 60 07 01 Fax: +33 (0)1 43 35 26 27 Email: cindymontier@euromarina.org