**Application for membership of EQAR**

(Country)

hereby applies for membership of the European Quality Assurance Register (EQAR) AISBL/IVZW as a Governmental Member.

We acknowledge that our membership fee amounts to ……………. EUR  
*(please contact the EQAR Secretariat or check the relevant membership fee document, to ask for/find the correct amount)*

We acknowledge that the membership fee is indexed annually.

We authorise the representative named below to represent us at the General Assembly.

We acknowledge that we have received EQAR’s statutes and we agree to adhere to EQAR’s statutes as a member.

I hereby declare that I am duly authorised to officially commit the applicant for the purpose of this application.

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| --- | --- |
|  |  |
| Place, Date | Signature |
|  |  |
| **Signatory:** | **Representative in the General Assembly:** |
|  |  |
| (Full name) | (Full name) |
|  |  |
| (Official function) | (Official function) |
|  |  |
|  | (Date of birth) |
|  |  |
|  | (Phone) |
|  |  |
| (Postal address) | (E-Mail) |
|  |  |
| (Phone) |  |
|  |  |
| (E-Mail) | (Additional comments) |