



MEMBERSHIP APPLICATION SPONSOR

IN WIRTSCHAFTSVERBAND GROSSHANDEL METALLHALBZEUG E.V. (WGM)

(Trade Association of Semi-finished Metal Wholesalers)

We hereby apply for membership in WGM as a sponsor:

Company name
Shareholder / Owner
Telephone:
Email:
Date of birth*
Further company officers
Telephone:
Email:
Date of birth *
Further company officers
Telephone:
Email:
Date of birth*

Business address
Telephone (switchboard)
Telefax:
Email:
Email:
Website:
Summary description of the company:
Date of formation:
Legal form:
Commercial register of
(city):
Entered in the commercial
register on (date):
Under the number (please
enclose copy of the excerpt
from the commercial
register):
register): Number of employees*:

Membership dues - Category

The membership dues to be contributed by sponsor members are governed by the rules on membership dues as applicable in the year in which you join. For 2017, the membership dues for sponsor members amount to \in 3,300.

Place / date

Company stamp / signature

All information provided will be treated as confidential.

^{*}Providing this information is optional

Please provide information for at least three persons in your company who will be authorized to receive information from WGM. We encourage you to also name contact persons in branch offices, if applicable. Additional contacts may be provided at any time.

1. Family name, first name:	
Position in the company:	
Telephone:	
Telefax:	
Email:	
2. Family name, first name:	
Position in the company:	
Telephone:	
Telefax:	
Email:	
3. Family name, first name:	
Position in the company:	
Telephone:	
Telefax:	
E-Mail:	
4. Family name, first name:	
Position in the company:	
Telephone:	
Telefax:	
Email:	
5. Family name, first name:	
Position in the company:	
Telephone:	
Telefax:	
Email:	

All information provided in this form will be treated as confidential.