

# Membership Application Form



Our organization would like to join as active member of the European American Chamber of Commerce The Netherlands (EACC NL).

**Address:**

EACC Netherlands  
The Edge Building  
Gustav Mahlerlaan 2970  
1081 LA Amsterdam

**Postal address:**

PO Box 187  
2270 AD Voorburg

**I would like to become**

- |   |  |
|---|--|
| <input type="checkbox"/> <b>Presidents Circle Member:</b> € 8,000 | <input type="checkbox"/> <b>Enterprise-size Organization Membership (&gt;250 Employees):</b> € 2,500 |
| <input type="checkbox"/> <b>Platinum Membership:</b> € 6,500      | <input type="checkbox"/> <b>Large Organization Membership (100-250 Employees):</b> € 1,750           |
| <input type="checkbox"/> <b>Premium Membership:</b> € 4,500       | <input type="checkbox"/> <b>Small Organization Membership (&lt;100 Employees):</b> € 1,000           |

The membership period is 12 months.

**Please find below our details:**

**Company name:** \_\_\_\_\_

**Contact person:** \_\_\_\_\_

**Job title:** \_\_\_\_\_

**Phone:** \_\_\_\_\_

**Email:** \_\_\_\_\_ **Website:** \_\_\_\_\_

**Company address** (if mailing address is different, incl. both): \_\_\_\_\_

**City:** \_\_\_\_\_ **Zip:** \_\_\_\_\_ **Country:** \_\_\_\_\_

I would like to receive an invoice, which will be paid within 4 weeks after the invoice date.

**Date** \_\_\_\_\_ **Signature** \_\_\_\_\_

**To expedite the processing of your membership application, please email the completed form to [marcel.schulze@eaccnl.eu](mailto:marcel.schulze@eaccnl.eu)**

