

EUROPEAN BALLOONING FEDERATION APPLICATION FORM

I, undersigned :……………………………………………………………………………………………………………………………......... Representing the nationwide organization(s) of balloonists :…………………………………………………………..... Country…………………………………………………………………………………………………………………………………………...... With a membership of …………….. active balloonists

Organization's adress:.............................................................................................................................

National registration number.................................................................................................................

1. Request that the above mentioned organization enters the European Balloonists Federation as a full member:
2. Agree with the version of statutes named : In English: EBF-statutes-mofified-271021.
3. Accept that the organization(s) named above, representing altogether the country:…………………………………………….. will get 1 (one) vote at EBF General Conference and meetings, (EBF statutes, Art 16.1) under the condition that a fee of 500 € is paid to EBF Treasurer, according to EBF statutes, Art.16.2) via bank transfer, to the following account :

FR76 3000 3003 7700 0372 6279 364

SOGEFRPP

I understand that if several national balloonist organizations co-exist in the country I represent, these organizations will share the fees and the vote.

Date, name, position, signature.

EUROPEAN BALLOONING FEDERATION – 6 rue Galilee – F-75116 PARIS FRANCE - [www.ballooning-federation.eu](http://www.ballooning-federation.eu/)