

Application Form for AMI Membership

Location of registration	<input type="checkbox"/> AMI Head office (Amsterdam)	
Membership status	<input type="checkbox"/> New Member <input type="checkbox"/> Renewal	
Prefix	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms	
First Name		
Middle Name		
Last Name		
Address		
Postal Code / Zip Code		
City		
State	Country	
Phone		
Fax		
E-mail		
Comments		
Type of membership	<input type="checkbox"/> Individual Membership Fee for one year - Euro 40 <input type="checkbox"/> Individual Membership Fee for three years - Euro 115 <input type="checkbox"/> Individual Membership Fee for five years - Euro 190 (applicable to LIFE membership) <input type="checkbox"/> Life Membership - Euro 1100	
Method of Payment	<input type="checkbox"/> Cheque <input type="checkbox"/> Bank Transfer <input type="checkbox"/> Credit Card	
Credit Card Type	<input type="checkbox"/> Visa <input type="checkbox"/> Eurocard/Mastercard	
Card Number		Card ID
Card Holder's Name		
Expiry Date	Signature	