

International HazMat Association e.V.

c/o GSR Services e.K. Schnellenberger Weg 11 21394 Suedergellersen Germany

## **IHMA Membership Application Form**

Applicant:				
Surname:				
Name:				
Company:				
Address:				
Street:				
Zip code:				
City:				
Country:				
Phone:				
Fax:				
E-mail:				
Membership:		Full Membership	(2.250,-€/year)	
•	_	Candidate Membership	(2.250,-€/year)	
	_	Associated Membership	(1.250€/vear)	

## Application form



Approvals:	
Please list applicable appro	ovals and name relevant Classification Society/ies:
I'm an approved	No
IHM Expert:	Yes, by:
No. of approved colleagues	
, , ,	No
approved by:	Yes, by:
Payments:	
The member fee shall be in	nvoiced as follows:
full fee on	ce per year
■ half fee tw	vice per year
_	
I have read und understoo accordingly	d the deed of incorporation of IHMA and I do accept and act upon it
Place, Date:	
Signature / Stamp:	
JIEHOLUIE / JIOHID.	

Please send a scan to: Henning.Gramann@gsr-services.com