

APPLICATION FORM - ASSOCIATE CORPORATE MEMBER

LEGAL IDENTITY

NAME OF COMPANY/ORGANISATION:

FIELD OF ACTIVITY:

ADDRESS:

TEL: E-MAIL:

LIAISON TO HELMPEPA

FULL NAME:

JOB TITLE: E-MAIL: TEL:

The Annual Contribution of the Associate Corporate Member for 2021 amounts to € 5.000.

I am aware, understand and accept that HELMPEPA, under the terms of applicable personal data protection legislation, records and processes the data contained in the Member Application, as well as sends updates concerning its activities as "Maritime Training Center for Pollution Prevention, Safety at Sea and Environmental Awareness".

«WE HEREBY PLEDGE TO SUPPORT VOLUNTARILY THE AIMS OF THE HELLENIC MARINE ENVIRONMENT PROTECTION ASSOCIATION – HELMPEPA AS STATED IN ITS DECLARATION OF JUNE 4TH 1982. WE FURTHERMORE PLEDGE TO CONFORM TO THE DECISIONS AND REGULATIONS OF THE ASSOCIATION AS STATED IN ITS ARTICLES APPROVED BY DECISION OF THE COURT OF ATHENS NO 2819/1982 AND ITS FOLLOWING AMENDMENTS»

Full name:

Title:

Date:

(Signature)