

**ETRIA MEMBERSHIP APPLICATION FORM**  
(For new applications only)

Please print out this form and fill in. The completed form should be send by fax or mail to the address indicated at the bottom of the form. Fields marked with asterisk (\*) must be completed.

**\*Type of Individual Membership**

- Euro 25,- per year (plus Euro 25,- entry fee)
- Euro 125,- five year membership incl. entry fee
- Participant of the recent ETRIA TRIZ Future Conference (no fees to be paid)

**Personal Information:**

Title:			
*First/Given Name:		Middle:	
*Last/Family/Surname:			
*Year of Birth:			

**Contact Information:**

*E-mail:	
Home phone:	
Work phone:	
Fax:	

**\*Home Address:**

For individual memberships only. If you wish to receive correspondence to your business address, please fill in "Business Address" form as well.

Address:			
City:		State/Province:	
Country:		Zip/Postal Code:	

**\*Business Address:**

Not needed in case of individual membership

Organization Title:			
Address:			
City:		State/Province:	
Country:		Zip/Postal Code:	

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

The completed and signed form should be sent by fax or e-mail to  
Fax: ++49 761 216 0951 69  
E-mail: info @etria.net

or by mail to:  
ETRIA e.V. - European TRIZ Accosiation  
Basler Str. 115  
D-79115 Freiburg - Germany

All payments should be performed via PayPal (www.paypal.com)  
Annual payments are to be paid at the beginning of calendar year using PayPal subscription option.  
Not paying membership fee leads to membership cancellation.