**MEMBERSHIP QUESTIONNAIRE**

**BULGARIAN RECYCLING ASSOCIATION (BAR)**

**Dear Mr. Chairman,** please (tick as appropriate):

* To be accepted as a member
* To change the type of membership of

1 Name of the organization: ..............…………………………………………………………………

2 UIC/Bulstat: ..............…………………………………………………………………………

3 Management address: ..............………………………………………………………………...

4 Correspondence address: ..............…………………………………………………………...

5 Phone number, fax,and e-mail: ........................................................................................................................

6 Representing the organization: ..............………………………………………………….......

7 Title: ..............……………………………………………………………………………..

Type of membership (*Please tick the required*):

* Gold Member
* Regular Member
* Associate Member
* Observer

**Declaration**

The undersigned........................................................................................................ I declare that I accept the Statute of BAR that I am familiar with it, and in my activities, I will comply with the BAR Code of Ethics and the details given by me in this application are correct.

Date: Signature: .................….

 /Company’s Seal/