

Cetie Membership registration form

Please send completed form via email on <mailto:contact@cetie.org>

For any further information you may require you can call-us on +33 1 42 65 26 45

Company details

Company name
Sector
Address
Country
Registration N°
Website

Billing contact details

First name, name
Dpt
Tel
eMail
City*
Postcode*
Country*
Specific documents and/or information requested by your company to proceed to payment:

* If different, from the company details.

Principe technical contact details

First name, name
Dpt
Tel
Position
eMail

On behalf of the company/organisation named above I confirm our request to become members of the Cetie association and I agree to comply with the Statutes and Rules of Procedure of Cetie (Cetie document DT00).

Date

Signature