

# NORDIC ARM REGISTRATION FORM



## I. COMPANY DETAILS

COMPANY NAME:	
ADDRESS:	
CITY:	
COUNTRY:	
VAT NUMBER:	
COMPANY REPRESENTATIVE CONTACT PERSON:	
BUSINESS PHONE:	
WEBSITE:	
EMAIL:	

*This information will be used in your member listing on nordicarm.org and for Nordic ARM Membership invoicing and for other Nordic ARM statutory purposes. Please also forward your company logo in order to include in your profile.*

## II. PAYMENT DETAILS:

The annual membership fee: 500 euro. Payment based on a VAT invoice.

**III. Please, accept above mentioned company as a member of the NORDIC ARM Association. I agree to use my personal data by the Association for statutory purposes, in accordance with the Act of 15 June 2018 no. 38 relating to the processing of personal data.**

.....  
(Data)

.....  
(Signature)

EMAIL TO [info@nordicarm.org](mailto:info@nordicarm.org) ONCE COMPLETED.

## IV. It is completed by the Nordic ARM Board:

*Adopted as a Member of the Nordic ARM Association*

.....  
(Data)

.....  
(Signature)