

## APPLICATION FOR MEMBERSHIP OF FIGO

This form is to be completed and enclosed with the documents supporting the application for membership of FIGO.

**Name of association** .....

**Acronym** (if any) .....

**Address** .....

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City ..... Zip/Post code .....

Country .....

**Tel number** ..... **Fax number**.....

**E-mail address** .....@.....

**President** .....

**Secretary General** .....

**Treasurer** .....

**Number of members** .....

**Date of foundation** .....

**Affiliation to national/  
international organisations** .....

.....

**Form completed by** ..... (PRINT NAME)

**Date** .....

**Signature** .....