IoT Council of Waste Management and Recycling Membership Application Form

To the Chair of IoT Council of Waste Management and Recycling

I would like to apply to become a member of the council, as stipulated in Articles 4,5, and 6 of the membership agreement. I have read and agree to the membership agreement.

	Date:
	Signature of Applicant:
	Printed name:
[Applicant]	
Company or Organization	
Name	
Affiliation and Position	
Zip Code	
Address	
Telephone	
Fax	
Email	
[Contact Person] (if applicate	!)
Affiliation & Position	
Zip Code	
Address	
Telephone	
Fax	
Email	
Please write down any reque	ts regarding the council's activities.