



PRACE AISBL institutional member Membership Application Form

Version 2.0 – 26 May 2024

Collected for the purpose of assessing member admissibility according to the [PRACE Statutes](#) Art.6

Organisation Details

Full name of the organisation

Short name of the organisation (optional)

Legal Status of the Organisation

(Legal form) _____

(VAT Nr) _____

Headquarters address

(Address) _____

(Zip code & Place) _____

(Country) _____

Correspondence address (optional)

(Address) _____

(Zip code & Place) _____

(Country) _____

Authorized Representation and Formal Membership Application

The undersigned (Full name and job title) _____

duly authorized to represent the above-mentioned organisation, hereby applies for the given organisation to become member of Partnership for Advanced Computing in Europe AISBL

in quality of ☐ plain institutional Member (entering PRACE for its own purpose)

☐ Lead Member (entering PRACE, possibly with other Associated Members)

☐ Associated Member under (Lead member) _____

Date

Signature

List the persons that need to be informed about the organisation admission process and who can answer PRACE staff questions for the purpose.

(Phone number)

(Phone number) _____

[illegible]

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Version 2.0 2024-05-26