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APPLICATION FOR MEMBERSHIP

1.1. Surname
1.2. First Name
1.3. Military Rank/Title
1.4. Address
1.5. Zip Code/City
1.6. Country
1.7. E-Mail
1.8. Phone/Mobile
1.9. Fax
1.10. I represent /Media/Journal/Institution

I herewith apply for membership in the European Military Press Association (EMPA).
I commit myself to support EMPA by active cooperation and I will regularly transfer the
membership fee.

.....
City, Date

.....
Signature

MEDIA DESCRIPTION

2.1. Title of the Magazine/Newspaper/Medium
2.2. Nation
2.3. Publisher
2.4. Edition's Timeframe
2.5. Language
2.6. Shape (colour/black-white)
2.7. Number of Pages
2.8. Circulation
2.9. Readers/Target Group
2.10. Complete Address of Editor
2.11. Complete Address of Point of Contact
2.12. Remarks

For EMPA – “Who is Who”

3.1. Military Rank/Title
3.2. Surname First Name
3.3. Name of Publication/Media
3.4. Address
3.5. Phone
3.6. E-mail
3.7. Mobile phone
3.8. PRIVATE: Address
3.9. PRIVATE: Phone
3.10. PRIVATE: E-mail
3.11. Professional experience: (total max. 60 words)
3.12. Personal interests (total max. 60 words)

Please send also a passport photo by e-mail or hard copy to the address on top of page one.