



INDEPENDENT UNION OF THE EUROPEAN LUBRICANT INDUSTRY
 UNION INDEPENDANTE DE L'INDUSTRIE EUROPEENNE DES LUBRIFIANTS

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MEMBERSHIP REQUEST TO THE UEIL
APPLICATION FORM FOR AN ASSOCIATION

I, the undersigned (Name, First Name, Title)

..... ,

On behalf of (Name of the National Association, possibly the official abbreviation)

..... ,

Herewith request to be considered for membership of:

Independent Union of the European Lubricants Industry (UEIL).

The Association

Name

Address

.....

General Telephone General Fax

General E-mail Website

The Management

General Manager Direct E-mail

Direct Telephone Direct Fax

The Member Companies

Please attach to this form an updated list of your member companies.

The Objectives and Mission Statement

Please state hereafter the objectives or mission statement of the association as mentioned in its by-laws.

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The Motivation and Expectations

Please state hereafter the motivation of your association to become member of UEIL and/or the expectations your association has in respect of UEIL.

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Signature:Place and date: