

# ACTIVE MEMBER APPLICATION FORM



## Company/Association Details

Legal name:.....  
Acronym:..... Country:.....  
Address:..... Telephone:.....  
Zip code:..... City:.....  
VAT no.:..... Website:.....  
General email: .....

## Contact Person Details

First name:..... Last name:.....  
Position:..... Telephone:.....  
Email:..... Accounting email: .....

## Membership Category

Active  Adherent

*For more information see the PRE Articles of Associations & Internal Rules on our website*

## Membership Category

Crates & Pallets  LDPE  PET  Technical Plastics  
 HDPE/PP  PTTs  PVC

*I understand that participation to this working group is subject to specific conditions as written down in the PRE Internal Rules.*

I hereby declare that I have read the Articles of Association and Internal Rules of PRE (see website) and agree to comply with them. I declare that the above mentioned information is correct and enclose a certified copy of our recycling permit.

.....  
*Date & Signature & name of authorized representative*

.....  
*Company Stamp*

**Please send this form back to Emilia Tarlowska via email: [info@plasticsrecyclers.eu](mailto:info@plasticsrecyclers.eu)**



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