

Signup form for an APQP4Wind Company Membership

The below applies for a Company Membership of APQP4Wind for a Supplier Company (over 500 employees):

Please fill in the form on your computer or use CAPITAL letters if done by hand.

Company: _____

Company SE number/VAT number: _____

Company address: _____

Zip code/City: _____

Country: _____

Contact person: _____

Email of contact person: _____

Email for receipt of invoice: _____

Please be aware if your company requires a PO number for invoices. If so, please secure the PO number before submitting the form.

PO number: _____

By signing this form

- › We comply to payment of an annual fee of EUR 2,000 for Company Membership of APQP4Wind for a Supplier Company (over 500 employees), which will be automatically renewed in January.
- › We accept that we can only terminate our membership with 6 months' notice before the end of a calendar year (no later than July 1).
- › We allow APQP4Wind to contact us via email in order to receive newsletters, invitations, etc.

Date: ____ / ____ - ____

Signature: _____

To be submitted to contact@apqp4wind.org.

Company name: APQP4Wind
Web: www.apqp4wind.org
Tax number: 39713349
IBAN: DK56 3000 0012 6658 22

Address: Lysbrohøjen 24, 8600 Silkeborg, Denmark
Email: contact@apqp4wind.org
Bank: DANSKE BANK 3409 12665822
BIC/SWIFT: DABADKKK