



ENTRY FORM

Company Information	
Name of the Company:	Date of creation:
Adress:	
ZIP Code:	City/State:
Phone:	Fax:
E-mail:	
Workforce on the 12-31-2017	

I, the undersigned _____

Function _____

Representative for the company _____

Express the wish to become a member of the AIR CARGO FRANCE ASSOCIATION.

I hereby declare that I have received a copy of the terms of the association, of which I am aware.
I hereby declare my commitment to respect all the obligations of members of the association.

I hereby declare I have been informed of the conditions of the law from January the 6th 1978 which regulating the right of communication concerning the personal data in the register of members of the association.

Company Stamp

Done at _____

The _____ *Signature*