

Scribus e.V.

Application for Membership

Name: First Name: Date of Birth:

Address:

Country: State/Province/Canton:

E-Mail: Phone:

I apply for membership of the association Scribus e.V. The Statutes and Articles are known to me, and I support the goals stated therein. I will pay the annual subscription fee as listed in the Scale of Fees.

Date, signature:

Declaration

(Please sign only one of the declarations listed below.)

A) I declare that I'm not a member or an employee of an organisation or a company that may have an interest in damaging the Scribus project. Should this situation occur in the future, I will notify the managing committee of Scribus e.V. immediately.

Date, signature:

B) I'm a member or an employee of an organisation or a company whose interests may collide with the goals of the Statutes and Articles of Scribus e.V.

Name of the organisation/company:

Date, signature: