

Investors Chamber of Commerce and Industry in Poland

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MEMBERSHIP APPLICATION FORM

Company name				
Company headqua	rters			
Zip code	City	Street	Flat	
Contact data				
Telephone	Website	E-mail addre	55	
Number of employ	ees			
Representative or F	Proxy of the Co	mpany in the Chamber		
• • •			ciation of the Chamber, I ige myself – on behalf of t	-
Company – to:				
 observe the resolutions; 	-	he Articles of Associati	on, the Chambers' regulat	tions and
 pay the mention timely manual 	•	the amount agreed by	r the Chamber's authoritie	es in a
•	hamber's Mana p status in the (-	changes having impact on	the
•	• •	es of the headquarters ber and others).	and contact data, change	rs of the
(city, date)		(company stamp, signatures of the representative)		

*please attach the current copy from the KRS to the Declaration