Membership Application Form

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| --- | --- |
| Requested Membership Class (Producing or Associate) |  |
| Company Name |  |
| Country |  |
| Sector |  |
| Shareholders |  |
| Mission of the Company |  |
| Strategy on Ethanol |  |
| % of turnover on ethanol (or expected turnover in near future) |  |
| Why would you seek cooperation with ePURE? |  |
| Contact person |  |
| e-mail address |  |
| Phone number |  |
| Mobile number |  |
| Website |  |
| Miscellaneous |  |

Please complete this form and return it by email to your ePURE contact person, or to info@epure.org.

We will deal with your request immediately, and a member of the ePURE secretariat will come back to you.