



INTERNATIONAL LIFE SAVING FEDERATION

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Bank account: 001-2421993-76

MEMBERSHIP APPLICATION

As a condition of membership you agree to maintain affiliation or membership of your national life saving organisation.
Please print the information as clearly as possible in BLOCK LETTERS.

MY NATIONAL ORGANISATION IS:

Information

FAMILY NAME	
FIRST NAME	
DATE OF BIRTH	
GENDER	
MAILING ADDRESS – Street and Number – Zip and City – State or Province – Country	
Telephone	
Telefax	
E-mail	
Web site	

Application

Please tick the correct duration

I apply for 2 years membership (bronze): 100 Euro	
I apply for 5 years membership (silver): 500 Euro	
I apply for 10 years membership (gold): 1,000 Euro	
I apply for 25 years membership (platinum): 5,000 Euro	

Method of payment

Please tick the correct method

Cheque/Money transfer	Bankcard	VISA	MasterCard

Card Number:		Expiry Date:	
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Signature of Card Holder	
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I have read and understand the terms of ILS membership and I agree that ILS will use my data to add it to its confidential kept database.

Please carefully check you have completed all details correctly. This will make processing of your card quicker.