

MEMBERSHIP APPLICATION FORM FOR NATURAL PERSONS

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NAME

.....
PERSONAL ID CODE

.....
POSTAL ADDRESS

.....
PHONE

.....
E-MAIL

.....
FOREST AREA (IN HECTARES)

- I hereby request to be accepted as a member of the Virumaa Forest Association. I have reviewed the Association's articles of association, I am aware of my rights and obligations as a member of the Association under the articles of association.
- For the fulfilment of actions prescribed under the articles of association, I authorise Virumaa Metsaühistu MTÜ to store, collect and process my personal and forestry data in the relevant registers (incl Metsaregister) and information systems.

Send the completed application to Virumaa Metsaühistu MTÜ, Rakvere 27, 41533 Jõhvi.

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SIGNATURE

.....
DATE

To be completed by the Forest Association

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ADOPTED ON (DATE)

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NO