**Consultative Committee – Application form**

The organization indicated below wishes to apply for membership of the UPU Consultative Committee. It declares that it is aware of the provisions of the UPU Consultative Committee Rules of Procedure, and that a membership fee, set by the Consultative Committee, will be charged annually.

**1 General information**

|  |  |
| --- | --- |
| Name of organization | |
| Sector represented  Postal customers/consumers  Postal workers/employees  Manufacturer | Delivery service providers  Supplier of postal goods and services  Other (please specify): |
| Head office address | |
| Brief information about the organization and its membership | |
| Legal status of the organization (please enclose relevant documentation) | |
| How is the organization funded? | |
| Reasons for joining the Consultative Committee (e.g. areas or topics of interest) | |
| Reciprocity granted to the UPU (e.g. activities in which the UPU can participate, documentation, information or services that the UPU can receive or access) | |

**2 Contact person**

|  |
| --- |
| Full name |
| Title |
| Address |
| Tel. |
| Fax |
| E-mail |

**3 Billing information (if different from 2)**

|  |
| --- |
| Full name |
| Title |
| Address |
| Tel. |
| Fax |
| E-mail |

|  |  |
| --- | --- |
| Place and date | Signature |

Please return to:

Consultative Committee Secretariat

Universal Postal Union

P.O. Box 312

3000 BERNE 15

SWITZERLAND

Fax: +41 31 351 02 66