

Appendix 4

Application Form to ITTC Membership



Application form for membership of the ITTC

Name of organisation	
Address	
Telephone, telefax	
E-mail	
Head / Director	
Contact person with ITTC	
E-mail to contact person	
Facilities for testing (including main dimensions and capabilities)	(use standard format)
Other facilities	
Main Activities	
Legal status	
Any other information of relevance	

Signed
(Director)