

Questionnaire / Correspondent Membership



Once you fill the form, please return by email to ifamembership@fertilizer.org

1. Name of applicant		
2. Address of applicant		
3. What is the name and address of the IFA member cor	mpany/organization from which you retired?	
4. How long have you worked in this company/organization?		
5. What was your position at the time of your retirement?		
6. What is your main reason for wishing to join IFA?		
7. What special experience and/or information could you contribute, either regularly or by invitation?		
Signed	Date	
(Name and title)		
Tel	E-mail	



Form of Application for Membership



Once you fill the form, please return by email to ifamembership@fertilizer.org

TO THE BOARD	
I (name of applicant – capitals)	
Of (address and country)	
Tel	Fax
E-mail	
Web	
hereby apply to be admitted as a CORRESPONDENT M	EMBER of the International Fertilizer Association (IFA).
If admitted to membership, I hereby agree to be bound by Bye-Laws.	by the provisions contained in the Articles of Association and
I hereby certify that I do not exercise any salaried, comorganization which is itself eligible for membership of the	mercial or profit-making activity on behalf of any company or e Association.
Signed	Date

In accordance with French law N°78-87 of January 6, 1978 pertaining to Data processing, Data Files and Individuals Liberties, members have the right to access, to correct, or to delete any personal information, by writing/emailing to IFA.