

MEMBERSHIP APPLICATION

Types of Membership

Membership in the American-Romanian Business Council is divided into two tiers, Board Membership and General Membership. All membership applications must be approved by the Board of Directors.

Board Membership includes:

- Board membership with organizational voting rights
- Ability to lead and direct the Council
- Invitations to private events
- Placement of the company logo on the Council website
- Priority for sponsorships and seating
- Invitation to and participation in all Council events

General Membership includes:

- Placement of the company name on the Council website
- Second tier priority for seating and sponsorships
- Invitation to and participation in all Council events

MEMBERSHIP TIER (SELECT ONE):

□ Board Membership (\$9,000 annual dues)

□ General Membership (\$6,000 annual dues)

APPLICANT INFORMATION:

Company Name:	
Website:	Business Area:
Company Description:	



The Council aims to advance the business interests of U.S. companies in Romania. To determine eligibility, please check all that apply:

 \Box The company was formed and/or incorporated in the U.S.

The company has substantial operations and facilities in the U.S.

The company employs substantial numbers of U.S. citizens

 \Box The company is headquartered in the U.S.

□Shares of the company are traded on a U.S. stock exchange or over-the-counter market.

The company pays U.S. state and federal taxes.

The company is not controlled or owned by foreign companies or persons.

Company Headquarters Address:

Address:	City:	State:	Zip Code:
Address:	Primary Contact		
Address:	Name:	Title:	
Phone: Mobile: Email: Mobile: Billing Contact (if different than above) Name: Title: Address:	Address:		
Email:	City:	State:	Zip Code:
Billing Contact (if different than above) Name:	Phone:	Mobil	e:
Name:	Email:		
Name:	Billing Contact (if different than at	oove)	
Address:	News		
Phone: Mobile: Email:	Addross		
Email:	City:	State:	Zip Code:
Secondary Contact Name:	Phone:	Mobil	e:
Name: Title: Address:	Email:		
Name: Title: Address: State:Zip Code: City: State:Zip Code:	Secondary Contact		
Address: Zip Code: City: Zip Code:		Title:	
City: State: Zip Code:	Name:		
	Addross:		
	Address:	2	Zip Code:

Please email completed form to: Henry Homans, <u>hfhomans@wms-jen.com</u>