

## Form: Confirmation to be HCV Network Indonesia Members

### **Membership Admission Procedure**

Parties willing to become members of HCV Network Indonesia should read the HCV Network Indonesia Statutes and by-laws (Anggaran Dasar) and agree to bound with it and submit a completed and signed application form. The signed form sent to HCV Network Indonesia Secretariat. The completed and signed application form can also be scanned form and sent through an electronic message to email address below.

Acceptance of membership will be taken as committment by an individual and the company or other entities to comply with the HCV Network Indonesia Anggaran Dasar.

### **Application for Ordinary member**

#### **1. Category (please tick one only)**

Individual    Organisation

#### **(please tick one only)**

Practitioner/Praktisi: certification bodies, consultants, assessors

Producer

Observer/Pemerhati: Environmental NGOs, Social NGOs, communities, academicians

#### **2. Identity of the Individual or Organisation (please print or type)**

For **Individual** category:

Name:

Profession:

Address:

Telephone:

Fax:

E-Mail:

Website:

For **Organisation** category:

Name of organisation:

Address:

(Organisation/Business Registration Reference or Number)

Telephone:

Fax:

E-Mail:

Website:

### 3. Organisation category only:

**Nomination of Representative(s)** (please provide details of one or two representatives). Application should be endorsed and signed by a senior member of the organisation who will take responsibility for ensuring the organisation conforms to the HCV Network Indonesia Statutes and by-laws.

	Primary Representative	Secondary Representative
<b>Name</b>		
<b>Designation / position</b>		
<b>Telephone</b>		
<b>Fax</b>		
<b>Email</b>		

### 4. Application for membership is made by:

Signature:

Name:

Designation / position:

Date:

### 5. Please return this form to:

HCV Network Indonesia

Jend. A. Yani street no. 68J, Tanah Sareal, Bogor 16161

West Java, Indonesia

Telp: +62-251-831-6156

Fax: +62-251-831-6257

Email: [info@hcv-ni.org](mailto:info@hcv-ni.org)

Transition contact person:

1. Kresno Santosa, +62-852-4726-2609

2. Wahyu F. Riva, +62-812-9956-720

Should you have further enquiries, please e-mail or contact us.

LEMBAR REKOMENDASI ANGGOTA BARU

**Aplikasi Anggota**

Nama Calon Anggota :

Organisasi :

Alamat Email :

**Direkomendasikan oleh (2 orang),**

Nama :

Nama :

Organisasi :

Organisasi :

Alamat Email :

Alamat Email :