Membership Application Form

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| --- | --- | --- | --- | --- | --- | --- |
| Organization name |  | | | | | |
| Specify type of legal entity  (government/public/private/limited  /partnership/others) |  | | Address | |  | |
| Introduction of your organization (qualification, honors, awards and others, in 300 words) |  | | | | | |
| The first representative of your organization | | | | | | |
| Name |  | Gender | |  | Date of Birth |  |
| Contact Information |  | | | | Job title |  |
| Introduction of representative （in 300 words） |  | | | | | |
| Name of liaison/executive assistant to representative |  | | Job title | |  | |
| Contact Information |  | | E-mail address | |  | |
| The second representative of your organization | | | | | | |
| Name |  | Gender | |  | Date of Birth |  |
| Contact Information |  | | | | Job title |  |
| Introduction of representative （in 300 words） |  | | | | | |
| Name of liaison/executive assistant to representative |  | | Job title | |  | |
| Contact Information |  | | E-mail address | |  | |
| The third representative of your organization | | | | | | |
| Name |  | Gender | |  | Date of Birth |  |
| Contact Information |  | | | | Job title |  |
| Introduction of representative （in 300 words） |  | | | | | |
| Name of liaison/executive assistant to representative |  | | Job title | |  | |
| Contact Information |  | | E-mail address | |  | |
| Application | \_\_\_\_\_\_\_\_\_\_\_ voluntarily joins the International Space Computing Organization, and requests for approval.  Signature of authorized representative： | | | | | |
| ISCO’s opinion on application |  | | | | | |
| Remarks |  | | | | | |