| ippo Membership Application | | | | | | | | | | | | | | | |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Applicant Information | | | | | | | | | | | | | | | |
| Full Name: | | | | | | | | | | | | | | *Please insert your photograph here* | |
| Date of birth (dd/mm/yyyy): | | | | | | Citizenship: | | | | | | | |
| Personal E-mail: | | | | | | | | | | | | | |
| Personal Phone: | | | | Fax: | | | | | | | | | |
| Personal address: | | | | | | | | | | | | | |
| City/State: | | | | State: | | | | | | | | | |
| Postal Code: | | | | Country: | | | | | | | | | |
| current Employment Information | | | | | | | | | | | | | | | |
| Position: | | | | | | | | | | | | | | | |
| Employer: | | | | | | | | | | | | | | | |
| Employer address: | | | | | | | | | | | | | | | |
| City: | State: | | | | | | Postal Code: | | | | | Country: | | | |
| Office Direct Phone: | | | | | Office E-mail: | | | | | | | | | | |
| Website: | | | | | | | | | | | | | | | |
| PUBLICATION (s) | | | | | | | | | | | | | | | |
| Publication Title: | | | Publication Ownership:: | | | | | | | | Circulation Area: | | | | Language(s): |
| Previous employment | | | | | | | | | | | | | | | |
| *Please list your career history.* | | | | | | | | | | | | | | | |
| Company: | | Position: | | | | | | | Publications (if applicable) | | | | Duration (mm-yy to mm-yy): | | |
| special interests /background | | | | | | | | | | | | | | | |
| *Please list your special interests and background in the Packaging field.* | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | |
| other Associations/organizations | | | | | | | | | | | | | | | |
| *If you are a member of any other trade associations/organizations, please list them here.* | | | | | | | | | | | | | | | |
| Association/Organization | | | | | | | | Position | | | | | | Member since (mm-yy) | | |
| Signature | | | | | | | | | | | | | | | |
| Signature of applicant: | | | | | | | | | | | | | | Date: | |
| Name of IPPO member Proposer: | | | | | | | | | | Name of IPPO Member Seconder: | | | | | |