

APPLICATION FOR MEMBERSHIP IN THE IATP PIONAIRS ASSOCIATION (Issue: Mar 2021)

0. General Information

The membership in the Association is open to all former IATP delegates who have attended at least SIX (6) conferences and have taken on a responsibility and have held a term of office in IATP,

OR:

have attended at least EIGHT (8) conferences as official airline representatives or official associate member representatives

AND:

who are no longer active in this function or in any kind of pooling activities,

1. Name of Applicant (Capital letters please)

Family Name: _____

Given Names: _____ Date of Birth: _____

2. Home Address

Street: _____

City/Province (including City-Code): _____

Country: _____

3. Contact Details

Home Telephone No. (including country code): _____

Home Fax No: _____ Mobile No: _____

E-mail Address: _____

4. Company Details

Name of Airline: _____ 2-Letter Code: _____

or

Associate Member: _____ 3-Letter Code: _____

Year of Joining the IATP and No. of first conference: _____

Date of Retirement from Active Role within IATP: _____

I apply herewith to be considered for membership of the IATP PIONAIRS Association and I acknowledge and agree to comply with the current terms of reference.

Date: _____ Signature: _____

Please e-mail or mail the completed application form to:

Peter Buchfeld

E-Mail: peter@buchfeld.de

Acceptance notification by e-mail will be forwarded.

A joining fee will also become payable, currently 70.- EUR in cash only.