



Registration Form ESTA Special Member

This is a fillable pdf form, please insert signature electronically

Your association details

Association name		Number of employees	
Contact person			
Address			
City		Postal code	
Country		Telephone	
E-mail			
VAT Number [if applicable]			

Section to be assigned to

Section Cranes	
Section Transport	

The following natural person[s] will represent the association

Contact person			
Address			
City			
Country		Postal code	
e-mail		Mobile number	

Contact person			
Address			
City			
Country		Postal code	
e-mail		Mobile number	

Applicable annual membership fee:

Special member fee € 2000,-

Association name	
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enters herewith a request to be registered as an Special member of the European Association of Abnormal Road Transport and Mobile Cranes [ESTA] and acknowledges, by signing this registration form, that it agrees with the conditions and regulations of ESTA.

Date	
Name	
Signature	