

LAWEA MEMBERSHIP APPLICATION



Please fax this completed application to LAWEA at +52-33-38178300 ext. 1 or return by e-mail to info@lawea.org.

DATE: _____

COMPANY NAME: _____

CONTACT PERSON: _____

ADDRESS: _____

CITY: _____ COUNTRY: _____ PHONE: _____ FAX: _____

E-MAIL: _____ WEB: _____

SELECT A CATEGORY FOR YOUR MEMBERSHIP:

Member Categories	Membership Criteria**	Annual Dues*	
		Latin-American	non Latin-American
Corporate (CO1)	<1 million (USD)	\$ 1,000	\$ 1,500
Corporate (CO2)	1 – 10 millions	\$ 2,000	\$ 3,000
Corporate (CO3)	10 – 25 millions	\$ 4,500	\$ 6,000
Corporate (CO4)	25 – 100 millions	\$ 9,000	\$ 12,000
Corporate (CO5)	>100 millions	\$ 15,000	\$ 20,000
Public Institutions (PNW)	No Wind	\$ 1,000	\$ 1,500
Public Institutions (PW)	Wind	\$ 5,000	\$ 7,000
National Association (NA)		\$ 1,000	\$ 1,500
Continental Association (CA)		\$ 2,000	\$ 3,000
Non Profit / Academic (NP)		\$ 150	\$ 200
Sponsor (S)		\$ 20,000	\$ 30,000

*Prices in USD

**Corporate membership criteria (CO) is based upon company revenues

If you have any questions, please contact us to info@lawea.org or +52-33-38178300 ext. 2.

Please provide a brief description of your company and its main activities:

Payment Information Total Dues: \$ _____

BankTransfer

For wire transfers in Mexico, Accounts Santander Bank of **Wind Energy Association Latin America A.C.**

USD: 014320/82500382246/6 Mexican PESOS: 014320/65502114387/6

International Bank Wire Transfers, please contact info@lawea.org

Credit Card

Card Number: _____ Expiration Date: _____ Security Code: _____

Name on card: _____ Visa: ___ Master Card: ___ Am. Ex: ___

Signature of this form represents a binding contract and that you are agree with the terms and conditions of LAWEA membership.

Signature