

All individual associations of Friends of museums are eligible to apply for Associate Membership of the WFFM.

WFFM Associate Members are entitled to:

- send a delegate to report to, and participate in, the annual WFFM General Assembly Meeting (AGM), and the triennial WFFM Congress. All Associate Members are represented on the Council through 4 elected Associate Members
- receive minutes of the WFFM Council Meetings Et AGM, and Congresses' proceedings
- receive WFFM newsletters and other WFFM publications
- participate in the international exchange of information with all WFFM members
- use the WFFM logo on publications

The WFFM encourages Associate Members to:

- promote the formation of new Friends associations and, in countries with no national federation, work towards forming a national federation of Friends
- develop links with similar organizations and other WFFM Associate Members in their countries
- develop a strong national and international voice to represent the needs of their Friends

Following application approval by the WFFM Executive Committee, the Membership Payment Form with the receipt of payment for the annual membership subscription should be sent to the WFFM Treasurer.

Applicant Details

Association name _____

Name of President _____ Year of Establishment _____

Number of members represented _____

Address _____

City/Postcode _____ Country _____ Telephone _____

Fax _____ Email _____ Website _____

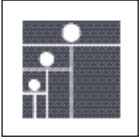
We wish to join the World Federation of Friends of Museums as an Associate Member.

Signature _____

Date ____/____/____

Please complete and return this form to the Executive Secretariat together with a copy of your Association's Statutes / Constitution / Annual Report of activities.

Ms Judit Amselem
WFFM Executive Secretary
c/o Israel Museum, P.O. Box 71117
Jerusalem 91710, Israel
Tel + 972 2 6708861 - Fax + 972 2 6708993
ja@imj.org.il



Applicant Details

Association name _____

Name of President _____ Year of Establishment _____

Address _____

City/Postcode _____ Country _____ Telephone _____

Fax _____ Email _____ Website _____

Membership Details

We wish to join the WFFM as an Associate Member.

Annual Associate Member subscription (January to December): US\$150

Payment Details

Payment can be made by VISA, cheque or money order.

Please make checks or money orders payable to:

WFFM, Royal Bank of Canada - 10 St. Clair Avenue West

Toronto, Ontario M4V 1L4 - Canada

Swift Code: ROYCCAT2 - Bank 003

Account number 400-203-6 | Transit number 06402 (if required)

VISA Credit Card details

Card number _____ Name on card _____

Expiry date _____ Signature _____

Please send this form completed, with your payment receipt to:

Ms Judit Amselem

WFFM Executive Secretary

c/o Israel Museum, P.O. Box 71117

Jerusalem 91710, Israel

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