



P Y A CORPORATE MEMBERSHIP APPLICATION FORM

Company Name _____

Name representative who will receive all correspondence:

First name _____ Last name _____

Position _____

Membership Type	
SHOREBASED	Corporate

CONTACT DETAILS

Company Address _____ _____	
Mailing address _____ (if different from above)	
Business Tel _____	Business Fax _____
Business Email _____	
Website _____	

Would you like to receive the newsletter by email? (please circle) Yes No

To the above personal email address? Yes or other email: _____

Payment Options				
Credit Card	Cash	Cheque	Transfer	Auto Renew upon expiration (please refer to payment page)

Please give brief description of the company's activities

Please send your company logo by email for your link on the PYA website

PYA
8, Avenue Mirabeau
06600 Antibes
France
Tel : +33 (0)4 93 34 91 16 Fax : +33 (0)4 93 34 21 83
Email : info@pya.org

Membership (official use only) :	
Membership type approved _____	
Membership number _____	
Application received on _____	
Payment method/Amount _____	
Card sent / collected on _____	