Institut Luxembourgeois des Administrateurs

Application Form Corporate, Affiliated & Individual Membership

	First N	Name: _		Last Name	e:	
	F□	MΠ	Date of birth:	Nationa	ality:	
			I details:			
	Position:			Address:		
			Country:			
			Mobile Phone:			
Pro. e-mail:						
	Home Address:		ee.			
	7in Co	nde + C	itv	r: Country:		
	•		o become a men	nber of the " <i>Institut Lux</i>	rembourgeois des Administrateurs":	
	_ as a	a Corp	orate member.			
cor tha	porate It I hav	e entitie e not b	es or companies, been fined, nor po	the list of which is bein	f the supervisory body of one or several ag attached to this application. I declare rily prevented from acting as a director regulation.	
	•	Institu			(max. 40 affiliated members) ng out work for ILA's commissions. is superior to EUR 500 million.	
	•	Listed Large Invest	category: EUR 1,350* (max. 6 affiliated members) isted companies whose market capitalization is less than EUR 500 million. carge unlisted companies (workforce ≥ 100 or share capital ≥ EUR 10 million). Investment funds/Management Companies that have over EUR 1 billion in assets un nanagement.			
	•	Small	and medium-size	* *	(max. 3 affiliated members) e ≤ 100 or share capital ≤ EUR 10 million). et do not fall within 2 nd category criteria.	
		For a	Il 3 categories, a	dditional affiliated mem	ber: + EUR 50*	
		Corporate membership applicants only:				
			attach the by-laws	composition of the Organia s of the Organization to affiliate members (exc	zation rel sheet available on www.ila.lu)	

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	as an Affiliated member under the corporate membership of: Organization name:					
	as an Indivi	dual member E	JR 300 *			
Luxer of conce temporany la	mbourgeois of mpanies doing the mpanies doing the mpanies doing the mpanies doing the mpanies do not be mpanies do not b	des Administrateurs ng business in all rporate governance nted from acting as	and I undertake to comply with the by-laws of the "Institute". I understand that the association is open to directors fields, as well as to any other physical or moral entity e. I declare that I have not been fined, nor permanently of a director of any entity required to be registered under ply the principles of the ILA Code of Conduct to their tor.			
	Individua	al membership app	licants only:			
	□ I atta □ The	following two memb	ode of Conduct the current list of my directorships) ers of ILA have accepted to sponsor my application. hber of the ILA Board of Directors.			
First s	sponsor	Mr. /Mrs.:	Signature			
Secor	nd sponsor	Mr. /Mrs.:	Signature			
In o	rder to impro	ve our communicat	ion, we would like you to specify your sector of activity:			
	□ Public Se □ Bank □ Insurance		☐ Funds☐ Industry☐ Technology☐ Service Provider			
Printe	ed Name:					
			Signature			

* This amount is an annual fee