

MEMBERSHIP FORM



Tržaška cesta 25, 1000 Ljubljana, Slovenija

I, the undersigned, voluntary join the SDR as a regular member and I agree that I will act in accordance with the Statute and Ethical rules of the SDR.

1. Name and surname _____ **2. Birth date** (dd.mm.yyy) ____ . ____ . ____

3. Education High school Univeristy Master/Ph.d Other: _____

4. Occupation

<input type="checkbox"/> Architect	<input type="checkbox"/> Interior Designer
<input type="checkbox"/> Electrical Engineer	<input type="checkbox"/> Exterior Designer
<input type="checkbox"/> Designer of El. instalations	<input type="checkbox"/> Designer
<input type="checkbox"/> Seller of light. equipment	<input type="checkbox"/> Lighting Designer
<input type="checkbox"/> Other: _____	

5. Working at

Company: _____

Address: _____ Postal Code: _____ City: _____

Phone: _____

6. Home address

Address: _____ Postal Code: _____ City: _____

Phone: _____

7. Address for notices: e-mail: _____

8. Primary field of work:

- DIV1 - Vision and Colour -
- DIV2 - Physical Measurement of Light and Radiation
- DIV3 - Interior Environment and Light Design
- DIV4 - Lighting and Signalling for Transport
- DIV5 - Exterior and other Lighting Applications
- DIV6 - Photobiology and Photochemistry
- DIV8 - Image Technology
- Other: _____

I consent that the information I have provided in the membership form, SDR applies only to the needs of society (membership record keeping, elections, membership fees, information, etc.).

I certify by my signature below that I have read and understand the Statute and Ethical rules of the SDR

In _____, date ____ . ____ . ____

Signature: _____

NOTE: Membership form shall be filled out and signed only once, but a man is full member of SDR only if a annual fee is paid. Fill out and send the form to: SDR, Tržaška cesta 25, 1000 Ljubljana, Slovenia

Personal information is protected according to the law and regulations.