



## Membership Application Form Airbrush-Fachverband e.V.

I/We apply for a membership at Airbrush-Fachverband e.V. as

**Full Member**

Please note the conditions for a full membership according to the Articles §3 subs. 2 as well as the advices in the members' contribution rules.

**Please mark the contribution class which applies to your company:**

Annual turnover net (prev. year)  
more than 500.000 €

Annual turnover net (prev. year)  
less than 500.000 €

**Please group yourself to one of the following activity sections:**

Industry  
(Manufacturer / Wholesale)

Trade

Training centres /  
Seminar providers

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**Corresponding Member**

**In which way are you using the airbrush?**

professional  
(business/freelance)

semi-professional  
(secondary activity /  
employment)

hobby

**In which field(s) of application are you working the most? (Multiple responses allowed)**

Illustration / Art  
 Custom / Automotive Painting  
 Mural / Wall painting  
 Scale modelling  
 Airbrushing T-Shirts

Body painting  
 Make-up  
 Nail Art  
 Pastry  
 Others: \_\_\_\_\_



## Member details

**Company:**

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**Contact person:**

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**If different:**

**Company owner / Shareholder:**

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**Address:**

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**Phone:**

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**Fax:**

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**E-Mail:**

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**Website:**

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- I/We do not want to be listed in the members' list on the association's website / in printed form.  
(delete as applicable)

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## Final declaration

I/We apply to the conditions required by the Articles of Association for a membership at Airbrush-Fachverband e.V. I/We accept the Articles of Association as well as the Members' Contribution Rules in their latest versions. The Articles of Association and the Members' Contribution Rules can be considered on the association's website by me/us at any time. If requested, I/we can also get a printed copy of the Articles of Association as well as of the Members' Contribution Rules.

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Place/Date

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Binding Signature / Stamp