**ACAB’c CAB membership application form**

The following Conformity Assessment Body, accredited according to ISO/IEC17065 and Regulation EU 910/2014 Article 3 (18) on eIDAS to perform eIDAS conformity assessments, applies hereby to become **an ACAB’c CAB member**.

|  |  |
| --- | --- |
| Company name :  Address :  Country :  City :  Register number :  Field of business activity :  Representative full name :  Contact person :  Phone :  e-mail : |  |
| As soon as our membership is granted, we like to see the following data published on the ACAB’c webpage and **we ensure that these information are kept up to date** by sending corresponding change notes to [secretary@acab-c.org](mailto:secretary@acab-c.org) in timely manner: **Note:** ACAB’c can not be held liable for incorrect information published or webpage updates in general. | |
| Link to your accreditation (mandatory):  Link to our company webpage:  Name of contact person (one person):  Email address of contact person: |  |

|  |  |
| --- | --- |
| ACAB’c operates an internal E-Mail distribution list to reach the ACAB’c members via [members@acab-c.org](mailto:members@acab-c.org). | |
| We like to get the following email address (one address) registered on this list: |  |

As representative of my company, I agree with the terms and conditions laid down in the ACAB’c Charter.

|  |  |
| --- | --- |
| Legal representative of the company (applicant) : |  |
| Date and signature : |  |

To be attached to this application :

* + the company up to date eIDAS accreditation attestation ;
  + a signed copy of ACAB’c Charter ;
  + a signed copy of ACAB’c Code of Conduct.