



**EGYPT & AUSTRIA**  
**MEMBERSHIP APPLICATION FORM**

I hereby apply for a membership of the *Egypt & Austria* society.

First Name:

Surname:

Institution:

Address:

Email:

Phone:

Fax:

€20 Individual membership    €10 Student membership    €50 Sponsoring membership

Membership is per calendar year. Payments may be made to the bank account:

Erste Bank

BLZ: 20111

Account nr.: 29267209900

IBAN: AT772011129267209900

BIC: GIBAATWWXXX

---

Place, Date

---

Signature

**Please return the completed form to:**  
**Egypt & Austria**  
**c/o Spiegelgasse 2/32, 1010 Vienna, Austria**