



MEMBERSHIP FORM

MEMBERS



Fields with * are required.

Ms / Mr*: **Your NAME + Last Name***:
..... **Nationality**:

E-mail*: **Personal ID number***:
..... **Statut***: **Institution***:

DG/AG/Institution*: **Grade / Step**:

Date of birth:

Private email:

Your private email will allow us to contact you if your professional email is suspended

Reason(s) for your membership*:
Please give us a brief description of the reason(s) why you want to become a member of our trade union.

Amount of your annual contribution*:

To access our services, we advise our future members to set up a permanent annual transfer according to the duration of their employment contract

KBC 734- 0115394 - 70
IBAN BE 60 7340 1153 9470
SWIFT/BIC KREDBEBB

Observations :

Registration by email
off-site.

If you want to stop your membership, you shall delete your automatic bank transfer and send us an e-mail to this functional mail-box: osp-sfe@ec.europa.eu .

- By submitting this form, I accept that the personal data entered will be processed by the SFE union. These data will not be used for commercial purposes or transferred to another entity. I can consult my data, modify and delete them by written request to the secretariat.
- I understand that I will receive union communications from SFE (info-members) via my email address.
- I have read and accept [the Statute of the SFE union](#).

Request to be a member of S.F.E. *

(* *Only when we have received proof of payment of your first annual fee and this completed and signed application form*)

Brussels, the Signature: 

- | | | |
|---|-----------------------------------|----------------------|
| * 24 € (monthly salary up to max 1.800 €) | 96 € (between 2.481 and 3.470 €) | 192 € (over 4.471 €) |
| 48 € (between 1801 € and 2480 €) | 144 € (between 3.471 and 4.470 €) | 24€ (retired) |