



## **MEMBERSHIP APPLICATION FORM**

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**We are delighted that you are interested in joining European Consumer Union (ECU).**

**Becoming a ECU Member means that you will be invited to participate in activities related to improving the consumer's conditions across Europe. Membership will enable you to network with other organizations sharing similar objectives. As a ECU member, you will have the opportunity to contribute to ECU policy making at a European level.**

**We look forward to receiving your application form.**

**For further details about how to apply, please see below:**

## **Guide to application process**

Please complete the form below in Word and email it with supporting documents to

europa.consumatori@gmail.com.

ECU will confirm receipt of your application. Please enclose supporting documents.

Following receipt of all documents your application will be sent to the ECU Board, and assessed according to the ECU's Statutes & Bylaws.

### **a. Details of your Organization**

<b>Organization Name:</b>	ACOP-
<b>Consumer area:</b>	
<b>Year Established:</b>	1993
<b>Number of Staff:</b>	1
<b>Number of Volunteers:</b>	17
<b>General Email Address:</b>	ACOPGERAL@SAPO-PT
<b>Website:</b>	
<b>Postal Address:</b>	RUA DO BRASIL, N° 4 3030-175 COIMBRA
<b>Telephone Number:</b>	239 604 733

**Aims/Mission of your organization.** Please let us know in no more than 100 words, about the work of your organization. (Please ensure that you include either a web address or an email contact, if you would like to share this information via the web.)

Is your organization recognized at...please state which level

- ☐ Local level
- ☒ National level
- ☐ European level

If your organization is a umbrella organizations, how many members do you have?

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## b. Contact details

<b>Name and surname:</b>	RUI TORRES
<b>Position:</b>	PRESIDENT
<b>Direct Email Address:</b>	RCC.TORRES@GMAIL.COM
<b>Direct Telephone:</b>	+351 966656128
<b>Address:</b>	RUA DO ALENTEJO, 35 3080 FIGUEIRA DA FOZ

Member is legally recognized as a consumer organization just at local level, or it is focus just in a policy, such as mobility, food, energy, etc.

**Please tick all boxes that apply** to show that your organization is eligible to be an Associate

Member:

- Must be non-profit and non-governmental.
- Must have a legal status appropriate to its country of origin, with a written constitution and/or by-laws.

**Please send a copy of your governing document and your legal registration certificate your completed application form (see checklist below).**

- The organization should state how it can assist ECU in achieving its aims.
- The organization may be a multi-stakeholder umbrella coalition or alliance.

## D. Check list

**We would be grateful if you could ensure that you include the following supporting documents in your application.**

- Your Legal registration certificate
- Your written constitution. Please include a summary in English of how your governing board is elected
- For umbrella organizations or networks, a full list of member organizations

***I confirm that the information above is accurate, and that my organization is eligible to be an Ordinary or Associate Member as defined above, and is committed to furthering the work of European Consumer Union to achieve improvement the consumer's conditions across Europe.***

Signed:



Date:

24/10/2022

Name

RUI TORRES

Position

PRESIDENT