

Global Network of Water Museums A flagship initiative of UNESCO-IHP (Resolution XXIII-5)*

Membership Application Form

Family Name:	
Given Name:	
Mr/Mrs/Prof/Dr (tick one)	Sex: F/M (tick one)
Position:	
Personal Mail address:	
Museum/Institution's Name: _	
Address :	
City:	Postal Code:
Country:	
	Fax:
Institution's Email:	
Open to the public: YES / NO	
Total Number of visitors / Year (da	ata referred to the last available year)
<u>Please note:</u> Send a scanned copy we membership's annual contributions <u>December 31st</u> of the year in which	s are considered for financial years and run from January 1st until
DATE	SIGNATURE

^{*} A flagship initiative of UNESCO-IHP. Resolution n.XXIII-5/2018 titled: "Global Network of Water Museums and UNESCO-IHP in support of water sustainability education and water awareness efforts".