FIVS
THE INTERNATIONAL WINE FEDERATION

2026 MEMBERSHIP APPLICATION FORM FOR ASSOCIATIONS

- **AFFILIATE** MEMBERSHIP -

Name of Association: _____

Address: _____

_____

_____

Telephone: _____ **Fax:** _____

E-mail: _____ **Website:** _____

Owner(s) or Principal(s) - *Names and Titles:*

_____

_____

_____

FIVS Representative(s) - *Names and Titles:*

_____

_____

Please select the appropriate Dues Category:

2026 FIVS ANNUAL DUES			
	Size of Association	**Annual Budget (€)**	**Amount (€)**
o	**SMALL**	< 50 000 €	876 €
o	**MEDIUM**	50 000 €-100 000 €	2,297 €
o	**LARGE**	> 100 000 €	4,604 €

Please note that the FIVS Bylaws require a thirty (30) day review process for all applicants. Once admitted, we will send you the final invoices to enable you to send bank transfers for the appropriate amount in Euros to the FIVS account.

I have duly taken note of the FIVS Articles and understand the moral and financial commitments in becoming a member. The above-mentioned organisation hereby applies for membership.

I agree to all these terms, _____

Signature *Date*

Please print name _____