

To the Board of COAR

Name of Institution: (‘the Applicant’)	
Official short name of the Institution (abbreviation):	
URL:	
Address:	
Contact Person acting as Authorised Representative*:	
Contact Email:	
Telephone and Fax Number:	

applies to become

- an Institutional Member
 a Special Member
 a Partner

of the Confederation of Open Access Repositories (COAR) with effect upon payment of the membership fee if applicable.

For applications as consortium please see contact the COAR Office.

The Applicant authorises the contact person as named above (*), to represent its institution and to exercise all rights and duties arising from the membership in COAR. The representative has the right to issue sub-authorisation. Sub-authorisation does not cover termination of membership.

The Applicant acknowledges

- that COAR is a not-for-profit association under German law (Register of Associations / Vereinsregister: Göttingen VR 200463);
- it’s support of COAR’s aims and governance as defined in its Articles of Association which are to be found on COAR’s website at www.coar-repositories.org;
- that members are obliged to pay a membership fee according to the “Membership Fee Regulations” as agreed by the General Assembly (in May 2013); available at COAR’s website;
- that specific conditions apply for Special Members;
- that all members and partners of COAR have the right to participate and speak at General Assembly Meetings of the association in accordance with its statutes;
- that Institutional members are entitled to both active and passive voting rights;
- that Special embers are entitled to passive voting rights, and Special members from less developed countries can apply for full voting rights;
- that Institutional members are eligible to offer a candidate for election to the Executive Board in accordance with the Membership Rules;
- that at least one person of the institution (usually the authorised legal representative) is subscribed to the members mailing list and will receive the associations newsletter. If desired, further persons from the institution can be added to the mailing list as well.

By and on behalf of

[Applicant institution]: _____

Signature of Authorised Legal Representative: _____

Signatory Name in Print: _____

Place/Date: _____

Please return by postal mail to: