Join EAB!
Thank you for supporting EAB to serve European citizens in the advancements of ID systems that are fair, accessible, secure and private.

How to become a member?
Mark your required membership, fill in the form, and return a completed, scanned or digital copy of this registration form. Please, remember to sign the form below.

Return address: secretariat@eab.org

About EAB
The European Association for Biometrics (EAB) is the leading voice for digital ID & biometrics in Europe. We are a non-profit, non-partisan association.

The EAB’s mission is to tackle the complex challenges facing ID in Europe, ranging from migration to privacy rights. Our role is to promote the responsible use and adoption of modern digital identity systems that enhance people’s lives and drive economic growth.

Through a series of EAB initiatives we support all sections of the ID community across Europe, including governments, NGO’s, industry, associations and special interest groups and academia. Our initiatives are designed to foster networking and debate, whether at an EAB hosted event across Europe, or in providing impartial advice & support to individual members.

We ultimately serve the citizens of Europe in the advancement of modern biometric identity systems that are fair, accessible, secure, while respecting privacy.
1. Mark your EAB Membership type

<table>
<thead>
<tr>
<th>Membership Type</th>
<th>Annual Fee (EUR)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Individual*</td>
<td>95</td>
</tr>
<tr>
<td>Students (BSc, MSc, PhD)**</td>
<td>0</td>
</tr>
</tbody>
</table>

(*) EAB is an inclusive association and provides, subject to approval by the EAB board, financial support to existing members and potential members who cannot afford the membership fee.

(**) Students are required to register with the email address of the academic institute and to provide proof of enrolment. If students are also affiliated to a profit or non-profit organisation other than academia, the respective membership fee of the organisation or the individual membership fee applies.

2. Contact Details & Signature

Organisation Name: ____________________________________________________________

Title: _____ First Name: ___________________________ Last Name: _______________________

Legal Address: __________________________________________________________________

Email:_________________________________________      Mobile: __________________________

☐ I agree that my personal name and my affiliation will be published on the website of the EAB.

Date:______________________________  Signature:_____________________________________

By signing this form I confirm to have read, understood and agreed to EAB’s statutes and by-laws.

EAB Membership starts on January 1st and ends on December 31st of a year; or from the date of payment until the end of the calendar year. Thereafter, memberships will be automatically renewed, unless cancellation of 2 months prior notice is given by the member, with the registered email address. Or if membership is terminated by EAB in accordance with its by-laws.