



Membership Application

The undersigned hereby requests enrollment as a member of

- *ALEF, Association Luxembourgeoise d'Etudes Fiscales* – Groupement luxembourgeois de l'IFA; and
- *International Fiscal Association (IFA)* in Rotterdam, The Netherlands.

Category:

Natural person

Legal person

- Government Tax Official
- Corporate Tax Officer
- Tax Practitioner
- Tax Judge/Academic

General information:

Full name: (*) _____

Profession: _____

Company name: _____

Field of activity: _____

Website: _____

Date and place of birth
(natural person): _____

Address: (**) _____

Email: (*) _____

Your membership application including a brief curriculum vitae (for the natural person), a motivation letter as well a copy of the identity card for a YoungIFA membership application should be addressed to the Secretary of ALEF – Groupement luxembourgeois de l'IFA, Me Georges Simon, at:

Loyens & Loeff
Attn. Me Georges Simon
18-20, rue Edward Steichen
L-2540 Luxembourg

(*) Contact name for legal person enrollment

(**) Home address of the natural person