



DESTINATION VIKING ASSOCIATION MEMBERSHIP APPLICATION

Name of Applicant

Name of Contact Person.....

Address of Organisation

.....

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Telephone Number

Mobile Number

E-mail Address.....

Website Address

Please describe how your organisation, museum, site, etc. fits into/relates to the Viking world

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I confirm that the above organisation wishes to apply for membership of the Destination Viking Association. I further confirm that by submitting this application form, I authorise the Association to invoice this applicant for the annual membership fee (70 Euro for 2013/14).

Signed

Date

Please submit this form to:
Gun Bjurberg
Treasurer, Destination Viking Association
Vikingagården Gunnes gård
Ryttargatan 270
194 71 Upplands Väsby
Sweden