



Membership Registration Form

Thanks for your interest in joining Reloop!

To become a member, please complete and return this form, along with a JPEG image of your organization’s logo (to be uploaded on Reloop’s website), to Samantha Millette at samantha.millette@reloopplatform.org.

Member Details

Last name:

First name:

E-mail Address:.....

Phone Number:

Organization Name:.....

Organization Address:

Type of Organization (Select One)

- NGO, Government, Academics
- Corporation
- Trade Union
- Association
- Other (please specify)

Number of Employees.....

After becoming a member, you will receive occasional e-mails from Reloop regarding new resources available on our website, or conferences or events related to our work. You may unsubscribe from these e-mails at any time.

Please tick this box if you’d rather not receive these e-mails.