**MeTTA Membership Application Form**

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| |  | | --- | | **Type of Institution** (Check one)  **○ Think Tank/ Research Institute**  **○ International Organization**  **○ Others\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |

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| |  | | --- | | **Official Name of the Institution**  **Address** | |

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| **Name of your city**   |  | | --- | | **Number of in inhabitants in your city/metropolitan area**  **City \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_/ Metropolitan Area \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** | |

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| |  | | --- | | **Representative of the institution**  Position: (ex.) President  **Name**  **Last Name**  **Date of the Appointment**  **Estimate date for end of the term**  **Address**  **Tel.**  **Fax**  **E-mail**  **Website** | |

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| |  | | --- | | **Technical Contact**  Position: (ex. International Relations Manager, Urban Planning Director, etc)  **Name**  **Last Name**  **Address**  **Tel.**  **E-mail** | |

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| |  | | --- | | **Other Technical Contact**  More names can be added if needed  **Name**  **Last Name**  **Address**  **Tel.**  **E-mail** | |

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| |  | | --- | | **Reason for joining MeTTA** | |

The organization mentioned above wishes to join the Megacity Think Tank Alliance (MeTTA). It thereby complies with the [Articles of Association](http://global.si.re.kr/content/articles-association), and undertakes the obligations.

**Date**

**Official stamp and signature**

Please, return this form filled out to:

**MeTTA Secretariat (Dr. Chang Yi)**

137-071 Nambusunhwan-ro 340-gil, Seocho-gu, Seoul, Korea

Phone: +82 2 2149-1076, +82 2 2149-1422/ Fax: +82 2 2149-1289

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