

Please complete legibly and return to your National Committee  
<http://icom.museum/the-committees/national-committees>

First name: \_\_\_\_\_

Last name: \_\_\_\_\_

Title: **Mr/Mrs/Ms/Prof/Dr**

Gender: **Female/Male**

Date of birth: \_\_\_\_\_

(Please circle your answer)

(Please circle your answer)

(DD/MM/YY)

Your institution or the last institution where you worked - to be used as main contact information :  Yes  No

Name:

Institution's website:

Your position:

Professional:

City:

Postal code:

Country:

Email:

Tel:  
(Please indicate country & area code)

Fax:  
(Please indicate country & area code)

Your personal information - to be used as main contact information:  Yes  No

Address:

City:

Postal code:

Country:

Email:

Tel:  
(Please indicate country & area code)

Fax:  
(Please indicate country & area code)

Category of membership:  Regular (voting)  Retired Professional\* (voting)  
 Student\* (non-voting)  Supporting (non-voting)

\*Submit supporting document

Language for communication (tick one):  English  French  Spanish

If you wish to become a member of an International Committee with full voting rights, please choose one:

Archaeology & History (ICMAH)  
Architecture & Museum Techniques (ICAMT)  
Arms & Military History (ICOMAM)  
Audio-visual & New Technologies (AVICOM)  
Conservation (ICOM-CC)  
Decorative Arts and Design (ICDAD)  
Disaster Risk Management Committee  
Collecting (COMCOL)  
COSTUME  
Documentation (CIDOC)  
Education & Cultural Action (CECA)

Egyptology (CIPEG)  
Ethnography (ICME)  
Exhibition Exchange (ICEE)  
Fine Arts (ICFA)  
GLASS  
Historic House Museums (DEMHIST)  
Literary Museums (ICLM)  
Management (INTERCOM)  
Marketing & Public Relations (MPR)  
Memorial Museums (IC MEMO)

Money & Banking Museums (ICOMON)  
Museology (ICOFOM)  
Museum Security (ICMS)  
Museums of Cities (CAMOC)  
Musical Instruments (CIMCIM)  
Natural History (NATHIST)  
Regional Museums (ICR)  
Science & Technology (CIMUSET)  
Training of Personnel (ICTOP)  
University Museums (UMAC)

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Committee chosen (only one): \_\_\_\_\_

You can indicate up to three other committees you have an interest in: \_\_\_\_\_

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I, \_\_\_\_\_, declare that I am eligible for membership of the International Council of Museums (ICOM) and wish to become a member of ICOM. I do not engage in dealing (i.e. buying and selling for profit) in the field of cultural property and accept the *ICOM Code of Ethics for Museums*.

DATE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_