

EUROPRACTICE ACADEMIC SUBSCRIPTION APPLICATION FORM

Please complete clearly (if by hand USE BLOCK CAPITALS)

MEMBERSHIP TYPE APPLIED FOR:

FULL
IC SERVICE

SOFTWARE
ONLY

FPGA
ONLY

MPW
ONLY

See conditions at <http://www.europractice.stfc.ac.uk/europractice/membership/membership.html>

Title: _____ **Name:** _____

The above named person must be a full time member of academic (teaching) staff with appropriate technical (ie Microelectronics) knowledge and appropriate connections to senior management. They will be viewed as EUROPRACTICE representative until we are informed of a change. Please [click here](#) for guidance on the role of EURORPRACTICE Representative.

Position: _____

Institute Name: _____ *(name of the University etc)*

Department: _____

Office address: _____

VAT Number: _____

e-mail: _____
(must be the academic address of the individual (no mail aliases, no Gmail, Yahoo etc))

Telephone: _____

ADDRESS TO SEND INVOICE TO if different from above

Contact Name (Person or Office): _____

Address: _____

e-mail (if blank will default to above): _____

DECLARATION

We confirm that we have read and understood, and shall abide by the Terms and Conditions relating to the EURO PRACTICE Academic Subscription Agreement and acknowledge that to use goods and services we may be required to complete other agreements direct with EURO PRACTICE Service Providers. We understand that in the event that we fail to comply with such Terms and Conditions in full (including but not limited to non-payment of valid invoices or non-compliance with end-user or license agreements) the Academic Subscription Registration Number may be withdrawn.

Signature: _____

Date: _____

Please return the following:



Completed Subscription Application Form (*this form*)



Fee commitment via Official Purchase Order to the value of the correct subscription rate. You will receive an invoice quoting your Purchase Order number which must be paid in order to validate your EURO PRACTICE membership. Bank details will be quoted on our invoice.



Completed Academic Subscription Agreement (*from our website*)



Evidence of Academic status*

*To qualify for academic membership of Europractice, your Institution must primarily be a degree (including undergraduate degrees) awarding Institution. Please provide a signed statement on your institutions letterhead which confirms your eligibility for academic membership. This statement must also provide a brief description of how design tools acquired via Europractice will go on to be introduced into your academic teaching and non-commercial research activities

Once completed and signed please attach this document, and others mentioned above, as a PDF to an e-mail and send it to MicroelectronicsCentre@stfc.ac.uk (paper copies are not required)