**Drive+ Supplier Platform**

**Application Form to become an Associated Partner (supplier associations)**

**About the supplier association**

Name of the association:

Address:

Website:

Sector/ scope of the association

**Representative of the supplier association in Drive+**

First name/ last name:

Job title:

Address:

Email:

Phone:

**Signature**

With my signature,       (organization’s name) is applying for becoming a Drive+ Associated Member. I confirm that I am authorized to act on behalf of the organization named above.

CSR Europe will send the MOU to join Drive+ to the contact person mentioned above.

Date, Name, Signature

*Please send your application to:* *info@drivesustainability.org**.*