



**SWISS  
DATACENTER  
ASSOCIATION**

# Member Application Form

(following statutes)

## Company

Name/Organisation

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Commercial register nr

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Street and number

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Place and postal code

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Phone

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Website

---

Nr of employee

---

Only for DC Members      rackable space in m2

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Available power in MVA

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## Contact Person

Name/First name

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Job Function

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Phone

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E-Mail

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Billing address (if different)

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Place/Date

---

Signature

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The applicant formally requests the membership for SDCA. He/she has knowledge of the statutes and the charter and agrees with them. He/she agrees to pay the admission and annual fee set by the General Assembly.

Send to:  
[info@sdca.ch](mailto:info@sdca.ch)