

MEMBERSHIP APPLICATION

I would like to be a regular/supporting* member

Name:

First name:

PESEL: Date of birth

Address:

Street: No

Zip code:

City:

Tel.: Fax:

E-mail:

Correspondence address (if different to above):

Street: No

Zip code: City:

I confirm I am aware of the goals and rules written in the Statute of the Society. I commit to actively join its work and to regular payment of member's fee.

I hereby consent to the use of the personal data contained in this application solely for the purposes of registration according to the Polish law of August 29, 1997 on the protection of personal data, (Dz. U Nr.133 poz 883).

....., day.....
/signature/

ACQUAINT MEMBER:

1. Name.....

....., day.....
/signature/

2. Name.....

....., day.....
/signature/

DECISION OF THE BOARD:

According to § 9 of the Statute the board decided to affiliate as a Member of the Society / refuse affiliation.*.

....., day.....
/signature/

If you would like to freely donate our Society, please send money on this account number
PEKAO SA IX o-Wa nr: 56124011251111001008727386