

MEMBERSHIP APPLICATION FORM OF CULTURAL ASSOCIATION "MASADA"
(in accordance with the third article of the Statute of Masada)

ONLY FOR THE ADMINISTRATIVE OFFICES - DO NOT FILL IN

Date of application:

CSEN membership card:

Date of the registration:

I, the undersigned, (Surname, First Name)

City of birth

Date of birth (day, month, year)

E-mail Address

Italian tax code

If you still don't have an Italian tax code, please enter below:

Type of identity document (Passport, National identity card)

Identity Card number

Identity Card Expires (day, month, year)

By signing below I request to be allowed to become a member of Masada Association and to take part in cultural activities with terms and conditions determined by the Masada Council. I declare to have read and comply with the provisions of the Masada Articles of Association. Also I declare that I'm prepared to pay for annual membership fee and for other membership dues of cultural activities chosen by me.

In addition, in compliance with the Italian Legislative Decree no. 196 dated 30/06/2003, I hereby authorize Masada Association to use and process my personal details contained in this document.

I agree to receive email newsletter about Masada cultural activities to the address indicated in this application:

YES

NOT

SIGNATURE