



ArtCiclova Association, Ciclova Montană, Str. Lacului 14, Romania

Membership Application Form

Name _____ Date of birth _____

Current address

Country _____ City _____

Street _____ ZIP Code _____

Contact

Phone _____SSSSSSSSSS

Email _____SSSSSSSSSS

Web _____SSSSS

Herewith I acknowledge the scope and objectives of **ArtCiclova Association** and agree to comply with the regulations of the organization.

I consent and agree to pay the annual membership fees of 12€ due in January, each year.

In my quality of active member of the Association I will benefit of free informative literature, invitations to events organized by the Association, and of tax discount for conferences, seminars and courses, as well as other similar benefits and compensations granted to the **ArtCiclova Association** active members.

Date

Signature

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Romania

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Fiscal Code 29111732

BANCA COMERCIALA INTESA SANPAOLO
ROMANIA S.A. TIMISOARA

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