

APPLICATION FORM FOR THE ASSOCIATION

(Pursuant to Rule 3 of the Social Statute)

I, the undersigned:

First name _____ Last name _____

Place of birth _____ Date of birth _____

Being resident in _____

Street address _____ N. _____

City/Town _____ State _____

Post Code _____

Tel/Cell _____

Social security number _____ Civil/marital status _____

Email _____

Educational qualifications _____

Profession _____

Qualification earned at The Academy of Fitness (instructor, personal trainer, other...)

Fields are required

APPLY to be admitted as an ordinary member for the carrying out and the achievement of the primary purposes set out by the Association, respecting the social statute and the decisions of the Bodies of the Association, and also paying the joining fee.

I declare I have taken note of the statute and of the Rules and I have accepted them entirely. In compliance with the art. 10 of the Law 675/1996 I hereby authorize to use and process my personal data for the achievement of statutory purposes. I also authorize my data concerning the registration to be communicated to other Bodies collaborating with the Association, and to be used and processed only to the extent necessary to the fulfillment of obligations under the Law and statutory Rules.

Free from stamp tax – art. 7 – Table - Annex B – D.P.R. 26/10/1972 n. 642.

_____ (legible signature)

For minors signature of parental authority
