

To the attention of the Board of Directors of

**Associazione EffectUs**

Via dell’Acquedotto Alessandrino 101

00177, Roma

C.F. 97836820585 P.IVA 13519251006

MEMBERSHIP REQUEST FORM

The undersigned ............................................................................................................................

born in ............................................................................................... on ........ /........ /...................

resident in Via/Piazza .......................................................................................... Postal code ...............

Municipality ..................................................................................................Province ...................

telephone ....................................................... mobile ..................................................................

e-mail ...........................................................................................................................................

**REQUIRES**

to be admitted, as a Member with Annual validity (from August 1st to July 31st of the following year)

to the Association EffectUs

The undersigned undertakes, with this request:

- to respect the purposes and rules imposed by the Statute of the Association for Entertainment, as well as any other decision taken by the competent Bodies of the Association;

- to pay the membership fee following acceptance of the request by the Competent Bodies.

For statistical purposes of the association, we ask you to tick the box indicating your professional level

- Student (professional in training)

- Amateur (non-professional enthusiast of the sector)

- Professional

The .............../.............../..............................

Signature .....................................................

The undersigned, availing himself of the faculty established by articles 46 and 47 of Presidential Decree 445/2000 and aware of the criminal responsibilities (articles 75 and 76 of Presidential Decree 445/2000) that he will face in the event of a mendacious or false declaration, furthermore, gives consent to the processing of personal data pursuant to Law 196/03 to the Association EffectUs.

Signature for acceptance ................................................................

**www.effectusevent.com**