

COFCG

CLUB OF FLORENCE

Application for Membership, please fax to +39 055 2309028:

To the Board
Club of Florence
Piazza di Bellosguardo 9a
I - 50124 Firenze

I hereby - as provided in Art. 7 of the Charter of the Association - apply for membership of the Club of Florence (a charitable association founded on 7.10.2003, as notarized by Notary Giovanna Acquisti in Florence, document register 29534, file 5992, tax number IT05364780485). I am aware of the Charter and of the annual membership fee pursuant to the contribution regulation of 7.10.2003.

I calculate my contribution as follows:

Student Membership annual fee **25.00 Euro**

In addition to the annual membership fee,
I intend to pay a voluntary contribution (Art. 7 of the Charter) of Euro _____

I agree that my/our voluntary contribution is displayed on Cof web site

Member's Name: _____

Name of legal representative: (2 names possible) _____

Position _____

Address _____

Telephone _____

Fax _____

E-mail _____

Member's URL _____

Date _____

Signature _____