

To
The World Confederation of the Past Pupils of FMA
Headquarters

OBJECT: REQUEST FOR A CARD COPY

The subscribed _____
Born in _____ on _____
Resident in str/Av/Sq _____ n° _____
Town or Village _____ Postal Code _____ Town/Province _____
Tel. _____ Cell _____ E-mail _____
Fiscal Code _____ Associated to the Union of _____
From year _____

IS REQUESTING

The copy of her/his Association card.

I declare I have paid the share of Euro 4.00 specifying the cause through:

Post Office – by postal current account N. 64962004 — IBAN IT78N0760103200000064962004 E1

Banca Popolare di Sondrio IBAN IT19M0569603207000005757X41 E1

Town _____, Date _____

Signature _____