

## **APPLICATION FORM**

## (EXCLUSIVE BY EMAIL SUBSCRIPTIONS portuguespelapaz@gmail.com)

ASSOCITE N° :

ASSOCITE N :	
NAME:	
ADRESS:	
CP CODE:TO	DWN:
COUNTRY:	
BI/CC:	NIF:
CONTACTS:	
ENTRY RIGHT: 10€ ANUAL QUOTA: 12€ 22€  DATE://	MANDATORY PAYMENT BY BANK TRANSFER  IBAN 0007 0000 0057 3651 1142 3  SWIFT / BIC BESCPTPL
Consent to the use of personal data:	
purpose of maintaining, administering and informed about its initiatives and activities contacts or email address provided above Peaceful Essence Association. I am awar to the contacts indicated below, for acceportability, rectification or elimination. I a Commission when I believe that the proteto-date, as well as to communicate any contacts.	nal Data by the Peaceful Essence Association taxpayer no 516870653 for the d managing the relationship between it and its associates, as well as to keep me is and/or collect the my opinion on such initiatives and activities, using any of the ve. This authorization will remain in force as long as I remain a member of the ure that I have the right to request the Peaceful Essence Association, in writing, as to my Personal Data, the limitation of the respective treatment, as well as its am also aware of the right to file a complaint with the National Data Protection ection of my personal data is at stake. I undertake to keep all data provided upchanges thereto, as long as I remain a member. Responsible for the processing Essence Rua do Corvo, no 10, Santa Bárbara, 2530-900 Lourinhã Telephone paz@gmail.com.
SIGNATURE	
	Tratado