



ASSOCIAZIONE CULTURALE JARANGA ETS
C.F. 95100060128 RUNTS n. 125063
ass.culturalejaranga@gmail.com
www.fraindi.com/associazionejaranga

FAMILY SUPPORTER APPLICATION FORM

First name _____ Last name _____
Place of birth _____ Date of birth _____
Street address _____ City _____
State/Province _____ Zip/Postal Code _____ Country _____
Email _____

I want to support the Associazione Culturale Jaranga as

Family Supporter: 35,00 EUR

Annual validity 1 January – 31 December

Name and surname of the family members to be included in the “family membership”:

I authorize personal data processing for the Association’s internal use only.

Place and date

Signature

Payment details

Associazione Culturale Jaranga ETS

Bank transfer: IBAN IT21T0623010802000047385174 BIC/SWIFT CRPPIT2P351

Please send this form to: ass.culturalejaranga@gmail.com