Membership form / donation to ASPECTS

ASPECTS is a non-profit association subjected to the French law of 1901, recognize for its general interest No SIREN: 840 222 376 00013

Full name:		
Full address:		
Phone number:		
Mail:		
I hereby declare wishing becoming	g an active/supporting me	ember, Active (10 €) / Supporting (5€) of ASPECTS
association (Delete as appropriate	e).	
For active members who want to	help the association plea	se indicate the skills you can offer :
	•	nd its status. À ce titre, je déclare reconnaître l'objet é mis à ma disposition. I have taken good note of
member's rights and duties and ac	ccept to pay my contribut	ion for current year.
The amount of membership is appropriate).	€ paid on	by check / bank transfer / cash (Delete as
I give a donation of	€ (You can deduct 66% of your donation from your income tax if you pay it	
in France)		
I wish to receive a fiscal attestation	n: □ yes □ no	
Done at	this	
Signature (Shall be preceded by "	read and approved" men	tion
	and to be sent to: Associat	ion ASPECTS Mairie, route de Sournia 66130 TREVILLACH
FRANCE Bank transfert : Establishment : Crédit : BIC : AGRIFRPP871	Agricole. IBAN : FR76 1710 6	000 0094 8642 587
sent. Following « informatique et liberté » law, If y	ou wish to exercise your right of insp	der to send information to members. Information is kept 5 years and are not ection and amendment, please contact the association at the above address.
Red	ceipt for member	ship / Donation
(To be filled in by the association	on copy to give to mem	ber)
I, the undersigned,	, decla	re as such, to have received the membership
form and contribution of Full Na	ame:	
A donation of	€	
Membership of this person is the	en validated. This recei	pt confirms the member as Active / Supporting
member et gives right to partici	pate to general assemb	oly.
Done at :	, this	
The president or his/her repre		