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## APPLICATION FOR MEMBERSHIP

First name and Last name: \_\_\_\_\_

Passport number: \_\_\_\_\_

Address: \_\_\_\_\_

Mobile # \_\_\_\_\_ e-mail \_\_\_\_\_

I would like to become a member of the ASCEND association. I have informed about the association's goals and statutes.

In case be accepted as a member, I undertake to comply with the provisions of the statutes and the decisions of the general meeting of the association.

\_\_\_\_\_  
(signature)

\_\_\_\_\_  
(date)