

TERRITORIAL CIRCLE OF “PARTITO ANIMALISTA EUROPEO”

Opening card Territorial Circle

SurnameName
Born..... date.....
Address
CityProvince
Profession
Office telephone
Cellular telephone
Habitation telephone.....
Fax.....
e-mail.....

**IT ASKS TO BE ABLE TO PROMOTE A TERRITORIAL CIRCLE, WITH THE
QUALIFICATION OF PRESIDENT, CALLED**

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TO SUCH AN END HE ENCLOSSES ITS FORM OF ADHESION AND THAT OF THE
OTHER SUPPORTERS TO THE TERRITORIAL CIRCLE CALLED UP

I allow the senses of the art 13 of the D.Lgs. 196/20003 the treatment of my personal data in
the measure of the purposes necessary to the Territorial Circle.

Identity document
Date
Signature