

MEMBERSHIP F.O.S THASSOS
Friends of the animals and the environment
Register Nr. 497

Name _____

Address _____

Place/code _____

Country _____

Telephone _____

Email _____

Please tick as appropriate:

- YES, I want to be a member of F.O.S with the right of general meetings and participate in upcoming elections. I accept that my membership fee every year is due in March.**
- I do not want to be a member anymore of F.O.S and cancel my membership.**

Place _____ **Date** _____

Signature _____