THE CLUB OF ROME, THE FINNISH ASSOCIATION

NEW MEMBER APPLICATION FORM

LAST NAME:

ALL FIRST NAMES:

DATE OF BIRTH:

HOME ADDRESS:

E-MAIL Home / Work:

PHONE Mobile / Work:

INTERESTS IN CLUB OF ROME ACTIVITIES:

MEMBER OF THE FINNISH ASSOCIATION OF THE ROMAN CLUB FILLS IN:

Application received by member of the Finnish Club of the Club of Rome on (date)…………

Application processed and approved as a full board member on (date)……………

Added as a regular member of ROKSY's membership register (date)……………..