



MEMBERSHIP APPLICATION FORM

PERSONAL DATA

Surname _____ First name _____

Address _____ ZIP code _____

Town/City _____ Country _____

Phone _____ E-mail address _____

FIELDS OF RESEARCH – COLLECTIONS

RECENT EXHIBITION AWARDS, if any

PHILATELIC LITERATURE PUBLICATIONS (books, articles, digital media), if any

I authorise the publication of my name in the list of members that will be published in the reserved area of the AISP website <https://www.aisp1966.it/>.

I give consent to process my data with the purpose of the AISP social activity, in accordance with the Regulation of the European Parliament 679/2016, regarding the protection of natural persons and free movement of such data.

Place and date _____ Signature _____