



**APPLICATION FORM \***

Applicant's Name: \_\_\_\_\_ (First) \_\_\_\_\_ (Surname)

Passport #: \_\_\_\_\_ Country: \_\_\_\_\_ Birthdate: \_\_\_\_\_ (dd/mm/yy) Gender: \_\_\_\_\_ (M/F)

Applying As:  Individual Member  Associate Member  
for the World Federation of Ozone Therapy – WFOT

\* Together with this form, please attach your Sponsor statement by a WFOT individual member, indicating that you are a professional/student trained/training in ozone therapy and that you are a professional/student in good standing.

**REGISTRATION DATA – CONTACT**

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

Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: + \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

**PROFESSIONAL DATA \*\***

**Educational (most relevant)**

	<u>Degree</u>	<u>Institution</u>	<u>Major</u>	<u>Graduation Year</u>
1	_____	_____	_____	_____
2	_____	_____	_____	_____
3	_____	_____	_____	_____

**Main job**

Title: \_\_\_\_\_

Institution: \_\_\_\_\_

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

Country: \_\_\_\_\_ Postal Code: \_\_\_\_\_

Phone: + \_\_\_\_\_ (\_\_\_\_) \_\_\_\_\_ Email: \_\_\_\_\_

\*\* Together with this form, please attach your curriculum vitae using European format (Europass - <https://europass.cedefop.europa.eu>) in English language.

**PAYMENT INFORMATION**

Membership fees may be paid, after membership approval, as follows:  
*By bank transfer free of charge credited to the **WFOT***

**ACCOUNT: BANCO POPOLARE – Pieve San Giacomo - BRESCIA - ITALY**  
**IBAN: IT11 Z 05034 57040 000000000851 – BIC/SWIFT: BAPPIT21V72**

Please do not forget to include your **NAME** and **FISCAL CODE** on the bank transfer.

**Privacy policy** - In relation to the provisions of DLgs 196/03, we assure you that your personal information (name, surname, qualification, profession and address) currently stored in our database shall be used solely for the purpose of sending business letters and notices from WFOT to member. In according with clause 7 of DLgs 196/03, you are entitled to refuse to authorise any use of the information in our possession for purposes other than those prescribed by law.