



Membership application

I apply for membership of DC-Association Finland

WITH CAPITAL LETTERS, PLEASE

*** Name:**

*** Address:**

*** Zip and Post:**

*** Phone:**

*** E-mail:**

Date:

Signature:

Member type: **Regular** **Support**

* required information

If mailing the application, cut address label here.

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Helsinki-Malmin lentoasema
00700 Helsinki
Finland**