

To  
INTERNATIONAL ACADEMY MAQ – IAMAQ  
MOVIMENTO ARTE QUANTISTICA  
Via Giuseppe Ponzio, 78  
20133 Milano - Italy  
C.F. 97867390151

**ASSOCIATION MEMBERSHIP FORM**  
**“INTERNATIONAL ACADEMY MAQ – IAMAQ MOVIMENTO ARTE QUANTISTICA”**  
**STUDENT**

The undersigned \_\_\_\_\_

Born \_\_\_\_\_ On \_\_\_ / \_\_\_ / \_\_\_\_\_

residing in \_\_\_\_\_

street \_\_\_\_\_,

Country \_\_\_\_\_

phone \_\_\_\_\_

Passport n. \_\_\_\_\_, released by \_\_\_\_\_,

on date \_\_\_/\_\_\_/\_\_\_\_\_, expiration date \_\_\_/\_\_\_/\_\_\_\_\_,

**Facebook profile:** \_\_\_\_\_

student of the school / Institute / University of \_\_\_\_\_

I asks to become a member of the " INTERNATIONAL ACADEMY MAQ – IAMAQ MOVIMENTO ARTE QUANTISTICA" and pay 60,00 (sixty/00) euro: the registration fee of € 30,00 (thirty/00) euro plus a one-time fee of € 30,00 (thirty/00) euro for identification documents, choosing one of the following ways:

- Transfer to Intesa San Paolo bank account, IBAN IT50 E030 6909 6061 0000 0171 710 - BIC BCITITMN
- On the IAMAQ official website at: <https://www.iamaq.org/entertheiamaq> by filling in the appropriate fields and choosing both of the following payment methods: 4. Payment of 30 euros for the release of documents and 5-b ) 30 euros payment for students

I declare that I have carefully read the Articles of Association, the IAMAQ Regulation-Organization Chart and accept the philosophy, aims and purposes of the Association, and all the provisions of the same Statute and Organization-Regulations, IAMAQ.

I received and I read the information pursuant to art. 13 of Italian Legislative Decree 196/2003, I consent to the processing of my personal data to the extent necessary for the pursuit of the statutory purposes, and in the manner indicated in the information itself.

I enclose:

- Registration document at the school, or Institute, or university
- Artistic curriculum;
- 10/15 photos for the site and for the IAMAQ Virtual Museum;
- copy of the Identity Document;
- signed privacy policy;
- 3x4 cm passport photo in electronic format.

Date and place: \_\_\_\_\_

Signature \_\_\_\_\_

*To be completed by the Association*

<i>n. members register</i> _____	<i>n. Identification Document</i> _____
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