

Enclosure1

COMPANY/AUTHORITY IDENTIFICATION FORM

ASSOCIAZIONE TESSILE E SALUTE
CORSO PELLA 2
13900 BIELLA – BI –

Name of Company/Authority _____

Address _____

Name of Legal representative _____

Date and place of birth _____

Address _____

Hereby certifies

That the Company/Authority can be included in one of the following categories:

Category	Membership fee (€)
<input type="checkbox"/> Artisan enterprise	250
<input type="checkbox"/> Industrial and commercial enterprise up to 10 million	650
<input type="checkbox"/> Industrial and commercial enterprise from 10 to 30 million	800
<input type="checkbox"/> Industrial and commercial enterprise from 30 to 50 million	1.300
<input type="checkbox"/> Industrial and commercial enterprise from 50 to 70 million	2.500
<input type="checkbox"/> Industrial and commercial enterprise from 70 to 90 million	3.000
<input type="checkbox"/> Industrial and commercial enterprise over 90 million	3.500
<input type="checkbox"/> Scale retail trade	1.000
<input type="checkbox"/> Large scale retail trade	2.000
<input type="checkbox"/> Trade associations	2.000
<input type="checkbox"/> Supporting member	5.000
<input type="checkbox"/> Others	500

(please tick the appropriate box as provided for by the law)

I hereby authorize the processing of my data pursuant to law 196/03 and I undertake to promptly inform the Association in case of changes in the data indicated.

Place and date

Stamp and signature