

To:

Mr. Luben Georgiev Chairman of the Board of Directors, Re-Act Non-Governmental Organization

VAT ID: 175841687

Company office: 4 Frujin Str., Poduyane residential area, Sofia

MEMBERSHIP APPLICATION

Ву.										
(name, middle name, surname)										
Personal Address:					-					•
Email:				, Ce	ell phone:					
Dear Mr.	Chairman,									
I'd like to	become a mem	ber/ associate	ed member (of Re-Act NO	iO.					
Personal	motives:									
(Please, le	t us know how do	you think you o	can contribute	e to our goals)					
I hereby 6 Act NGO.	expressly declar	e that I am av	vare of and	fully accept	the provi	sions of	the Sta	tute of the	Association	on of Re-
Date:	·····,							Signature	l:	