

CLUB EPAGNEUL BRETON DE CHYPRE

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APPLICATION FOR REGISTRATION OF MEMBER

Name :

I.D.

Address :

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Occupation :

Tel. no. : **Off. :** **Mob. :**

Fax :

To : The Board of the C.E.B.

Sirs,

I would be grateful if you could select me as a Member of the Club.
I agree with the Statute and the Regulations of the Club and declare
ready to observe and comply with them

With Respect

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* The application can be dispatched by post to the address of the Club
and it should be accompanied with a cheque with the amount of €10 on
Club's name.