

MEMBERSHIP APPLICATION FORM FOR NATURAL PERSONS

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NAME

.....
PERSONAL ID CODE

.....
POSTAL ADDRESS

.....
PHONE

.....
E-MAIL

.....
FOREST AREA (IN HECTARES)

.....
CADASTRAL REGISTER NUMBER

- I hereby request to be accepted as a member of the Läänemaa Forest Association. I have reviewed the Association's articles of association, I am aware of my rights and obligations as a member of the Association under the articles of association.
- For the fulfilment of actions prescribed under the articles of association, I authorise Läänemaa Metsaühistu MTÜ to store, collect and process my personal and forestry data in the relevant registers (incl Metsaregister) and information systems.

Send the completed application to Läänemaa Metsaühistu MTÜ, Tallinna mnt 80, 90401 Uuemõisa, Haapsalu.

.....
SIGNATURE

.....
DATE

To be completed by the Forest Association

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ADOPTED ON (DATE)

.....
NO