

Association TORIYABA

Aide aux personnes vulnérables du Burkina Faso

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Numéro de SIRET : 837 848 241 000 19

MEMBERSHIP FORM

Applicable for year 2022

Fill in this form, then date and sign it. Then send it to the association head office

First name *:	Last name *:	
Attest on honor be 18 years or	more *:	
Address *:		
email :		
Cell phone :	WhatsApp : Other number :	
Membership fee for a calendar	year : 15,00 € Amount paid * :	euros
Payment mode *: Ca	cheque * Credit Card W (* Payable to « Association Toriyaba »	Vire transfer ** (** contact us)
Need a fiscal receipt :	If you are a taxable individual in France, your donation made annual income tax reduction for 66% of its amount within the taxable income	ay entitle you to an
Additional details :		
Date *:	Signature *:	an aignatura)
(Text or dd/mm/yyyy)	(Handwritte	en signature)

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