



Membership

I hereby confirm my membership in the non-profit organization Adesuwa and my acceptance of its association by-laws. The minimum membership duration is one year. It can be cancelled three months prior to the end of the membership year.

- ☐ I want to become a sponsoring member and support the work of Adesuwa (5€ monthly).
- ☐ I want to sponsor a child (15€ monthly).
- ☐ I want to sponsor a child and support Adesuwa's projects too (20€ monthly).

First name / Family name: _____

Address: _____

Telephone: _____

E-mail: _____

Birthday: _____

- ☐ I agree that the Adesuwa association can store the above membership data for administration Purposes **(required)**.
- ☐ I would like to be informed about the activities and publications of Adesuwa and agree that the association can use my membership for this purpose.

Place / Date / Signature