

MEMBERSHIP FORM

Date: _____
OR No: _____

To be accomplished by the **individual applicant / primary representative of the group.**

New Membership Renew Membership

Last Name:

First Name:

Middle Name:

Mailing / Registered Address

Unit No., Building Name

Street No., Street Name

Subdivision, Barangay

City, Postal / Zip Code

Email:

Mobile No.:

Birth Date:
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Nationality:

Sex: Male Female

MEMBERSHIP CATEGORIES AND BENEFITS
Membership is valid for one (1) year from the date of registration.

Types	Description	VAT inc
AFM Student	Register to our classes at a reduced rate and enjoy our facilities! Signing up for 2 classes already pays off the joining fee!	P1,600

VOTING MEMBERS		
Individual Membership	The basic membership type that allows access to AFM facilities with 10% discount at Bistro LCR and AFM events, plus benefits from the Club of Partners and the privilege to vote at the General Assembly!	P2,500
Family Membership	For couples or families! The basic membership privileges for 2, up to 5, family members.* With 2 votes at the General Assembly! *2 adults + 3 minors	P4,500
Benefactor Membership	Your support is invaluable to AFM! Get access to AFM facilities, 10% off at Bistro LCR and AFM events, plus benefits from the Club of Partners and the privilege to vote at the General Assembly!	P10,000

In compliance with the **Data Privacy Act (DPA) of 2012**, and its **Implementing Rules and Regulations (IRR) effective since September 8, 2016**, I allow the **Alliance of Francaise of Manila Inc. (AFM)** to provide me certain services declared in relation to the membership I purchased. As such, I agree and authorize AFM to:

- Retain my information for a period of **one (1) year** from the date of membership expiry, or at such time that I submit to AFM a written cancellation of this consent, whichever is earlier. I agree that my information will be deleted / destroyed after this period.
- Inform me of future events, promotions, offers and similar and base its offer using the personal information I shared with the company up to **one (1) month** after the expiry of my membership. I also acknowledge and warrant that I have acquired the consent from all parties relevant to this consent and hold free and harmless and indemnify AFM from any complaint, suit, or damages which any party may file or claim in relation to my consent.

SIGNATURE: _____

DATE: _____