

**WORLD AID ORGANIZATION FOR HUMAN RIGHTS
STATUS HUMANITAS**

APPLICATION FORM FOR MEMBERSHIP

SURNAME: _____

GIVEN NAMES: _____

ADDRESS: _____

EMAIL: _____ **TEL.:** _____

DATE OF BIRTH: _____ **PASSPORT / ID NO.:** _____

DATE OF EXPIRY: _____ **NATIONALITY:** _____

Were you involved in any civil / criminal case: _____

If yes, please details: _____

Applicants signature

MEMBERSHIP:

**W.A.O.H.R. – WORLD AID ORGANIZATION FOR HUMAN RIGHTS
STATUS HUMANITAS**

1. The membership is voluntary.
2. The membership is non-transferable to other persons.
3. For the membership the member accept a yearly membership fee.
4. This membership fee is a **DONATION** for the humanitarian aid programs of W.A.O.H.R. The membership fee is 50 US \$ or 50 € per year. (P www.waohr.com)

INTERNATIONAL ID CARD:

- On expiry the ID-card must be submitted to the head office. After date of expiry the membership has to be renewed regularly.
- On change of residence the head office must be informed by the member.
- In case of loss of the ID-card, the member must inform the head office in Spain immediately.
- If the member have any doubts, questions or problems he can contact the W.A.O.H.R. head office in Spain. All rights reserved upon W.A.O.H.R.

DECLARATION:

1. I hereby expressly acknowledge that the information I have given above is, to the best of my knowledge and belief, true and none of it is untrue or has been suppressed.
2. I strictly adhere to the rules and regulations of the W.A.O.H.R. which come into force from time to time.
3. **W.A.O.H.R. is not responsible for any misuse of ID-cards issued to the members during their membership with W.A.O.H.R.**

_____ 2017

APPLICANTS SIGNATURE

With my signature I hereby expressly acknowledge that the information I have given above is, to the best of my knowledge and belief, true and none of it is untrue or has been suppressed.