

## MEMBERSHIP FORM

### Vueling (Pilots)

First Name \_\_\_\_\_ Last Name \_\_\_\_\_

Employed by **Vueling S.A. Italian Branch**

Rank \_\_\_\_\_ Based in \_\_\_\_\_ Date of employment \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Staff Number \_\_\_\_\_ Part Time no ☐ yes ☐ part time option

Italian Social Security Number (codice fiscale) \_\_\_\_\_

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Place of Birth \_\_\_\_\_

Nationality \_\_\_\_\_

Address (wherever you want to receive our mail) \_\_\_\_\_

ZIP code \_\_\_\_\_ City \_\_\_\_\_ Prov. \_\_\_\_\_

Country \_\_\_\_\_ Mobile Phone \_\_\_\_\_

E-mail (*capital letters*) \_\_\_\_\_

Already covered by APPN insurance? YES ☐ NO ☐

I request to join ANPAC, as an ordinary member, pledging to observe the statutory provisions and any other decision of ANPAC.

I hereby authorize **Vueling S.A. Italian Branch** to deduct, on monthly basis:

- ☐ Captain € 45,00 (forty-five/00)  
☐ First officer € 25,00 (twenty-five/00)

as union fee payment and to transfer it to ANPAC.

Informed by 'ANPAC' of my rights according to DLG No. 196/2003, I hereby express my consent to process my personal data.

I hereby give my consent that ANPAC and my employer process my personal data within the boundaries of my contract and the applicable legislation.

In addition, and with immediate effect, I hereby request to cancel any other membership I have previously signed in favour of other unions.

Date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

Signature \_\_\_\_\_