

Registration Form

I register me as

Passive member (minimum annual contribution Fr. 20.00)

Thank you very much for your support.

Name :

Prenome :

Address :

Postcode :

City :

Tel. / e-mail:

Date :

Signature :

Please pass this registration form to one of our active members
or send it to our actuary:

Frau Susanne Imboden, Hardwaldstr. 14, 8951 Fahrweid (Tel. 044 740 47 48)