



Membership form
2018

chef-lieu - 73 310 Motz
aihr730174@gmail.com

NAME:

First name:

Birth date (DD/MM/YY):

Address:

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Cell :

Land line:

E-mail:

Please enclose a check made out to AIHR
10€ for individuals, 15€ for a couple.

Dated:

Signature:

A membership card will be sent to you shortly.