

APPLICATION FOR SENIOR MEMBERSHIP

Applicant member's name and surname(s): _____

Member's clau number: _____ Date Of Birth: ____/____/____

The undersigned, meeting the requirements of having been a member for 40 years continuously and being over 65 years old, hereby request the Veteran Membership Card:

Signature: _____

ID/Passport: _____ Date: ____/____/____

Please Fill in all details and sign.

You can submit this form with the photocopy of the member's ID, via the following means:

- Email: oab@fcbarcelona.cat
- Fax: (+34) 93 496 3797
- By post or in person: OAB, FC Barcelona, Av. Aristides Maillol s/n 08028 Barcelona.

In case the member cannot attend the Club's office due to medical reasons, a relative can issue this request enclosing a photocopy of the member's ID, as well as the applicant member's certificate of existence.