

Date received:

Completed by association



**PLATAFORMA DE
AFECTADOS POR
LA LEY TURÍSTICA**

Membership number:

Completed by association

MEMBERSHIP APPLICATION

Please fill out this form and return to us by post or email (*instructions are provided at the end of this document*), along with a copy of a document that verifies your identity, and a copy of a document that shows your bank account number for us to set up any direct debits. We'll be in touch with you to confirm that your membership registration has been processed:

1. First and last name(s): _____

2. Type of identity document: NIF NIE CIF Passport
 Other: _____

3. Identity document number: _____

4. Address (street and number): _____

5. City: _____ 6. Post code: _____

7. Country: _____ 8. Nationality: _____

9. Primary telephone: _____ 10. Secondary Telephone: _____

11. E-mail: _____

12. Complexes where you own properties:

13. How would you like us to contact you?:

Email (required) WhatsApp

14. Which payment frequency would you prefer?

Annual (60€)

Plataforma de Afectados por la Ley Turística (PALT)

Avenida de Tirajana, 36. Apartamentos Los Molinos, local 30. 35100 San Bartolomé de Tirajana

<http://afectadosporlaleyturistica.com> | socios@afectadosporlaleyturistica.com

15. Payment method:

Bank transfer Direct deposit

You may make your membership payments per your chosen payment frequency, directly to our bank account ES40 0075 0883 4206 0126 5508 (Banco Popular), in which case you should send a **copy of the banks receipt** along with this application form.

I hereby apply for membership of the PLATAFORMA DE AFECTADOS POR LA LEY TURÍSTICA (Platform for those affected by the tourism law), and confirm that I will respect and adhere to the statutes of the association.

Also, in compliance with law 15/1999 of the 13th of December with respect to the Protection of Personal Data (LOPD), the Platform of those Affected by the Tourism ILw (PALT), as a the organization responsible for protecting your data, would like to inform you of the following points, to which you indicate your acceptance by signing below:

1) The personal information that we collect, will remain incorporated in a file intended only to store information about the members of our platform. All fields marked with an asterisk (or other symbol) are mandatory, and we will not be able to process your application if this data is not provided.

2) We would also like to inform you that you retain your rights to access this data, make corrections, cancellations, or objections by sending an email to afectadosporlaleyturistica@gmail.com indicating your first and last name(s), and the number of your identification document.

(Sign here)

On the ____ of _____, 20____

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