

Malta Society of Arts, Manufactures & Commerce  
Palazzo De La Salle, 219 Republic Street, Valletta  
Tel: 21244339 Fax: 21246074 E-Mail: [msoamc@maltanet.net](mailto:msoamc@maltanet.net)

MEMBERSHIP APPLICATION FORM

Name / Surname \_\_\_\_\_

Nationality \_\_\_\_\_ ID Card No \_\_\_\_\_

Home Address \_\_\_\_\_

Profession/ Occupation \_\_\_\_\_

Home Telephone No. \_\_\_\_\_ Mob / Office \_\_\_\_\_

E-Mail \_\_\_\_\_ Fax \_\_\_\_\_

Special interests \_\_\_\_\_

If an artist, please state whether you are interested in taking part in organised Art Exhibitions YES / NO

The Membership Fee is Lm2 per year.

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_