

**SPAC**

To the President of the Board
of Sindicato dos Pilotos da Aviação Civil
(Portuguese Civil Pilots Union)

REGISTRATION DATE

/ /

Member Application Form

PERSONAL INFORMATION		
Full Name:		Company Name:
Birth Date:	Nationality:	Marital Status:
/ /		

CONTACTS		
Cell Phone:	Phone:	e-Mail:

POSTAL CODE		
Address:		
State / Zip Code:	City:	Country:
Other Address:		
State / Zip Code:	City:	Country:

DOCUMENTATION		
Tax ID No.:	Exp. Date:	Issued by:
	/ /	
Passport No.:	Exp. Date:	Issued by:
	/ /	
Licence No.:	Exp. Date:	Issued by:
	/ /	
National ID No.:	Social Security No.:	

Sindicato dos Pilotos da Aviação Civil

Rua Frei Tomé de Jesus, 8
1749-057 Lisboa PORTUGAL
Telf: +351 217 926 800
Email: geral@spac.pt





SPAC

PROFESSIONAL INFORMATION

Current Airline:		Admission Date:
		/ /
Company Address:	Rank:	No. In Company:

BANK DATA

Bank:	Address:	City / Country:
IBAN:		BIC SWIFT:

FAMILY INFORMATION (Optional)

Name:	Blood Relationship:	Contact:

Documents to be submitted:

- Copy of Employment Contract
- Copy of Flight Crew Licence
- Copy of Crew Card
- Copy of Last Pay Slip
- Photography

I hereby declare to have full knowledge and understanding of SPAC Statutes and therefore I want to be admitted as a member.

Signature

A DIRECÇÃO:

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