



**NATIONAL INSTITUTE FOR THE GUARD OF HONOUR  
AT THE ROYAL TOMBS OF THE PANTHEON**

00186 Roma – Via della Minerva, 20 – Tel.: 066793430 Fax 0669925484  
c. c. p. 59325001

**REQUEST FOR ADMISSION**

Membership No. \_\_\_\_\_

I, the undersigned, knowledgeable of the statutes of the organization, desire to become a member of the Guard of Honour.

SURNAME AND FIRST NAME \_\_\_\_\_

BORN IN \_\_\_\_\_

ON \_\_\_\_\_

ADDRESS \_\_\_\_\_

POSTAL CODE \_\_\_\_\_

TOWN \_\_\_\_\_

PROVINCE \_\_\_\_\_

COUNTRY \_\_\_\_\_

HOME PHONE \_\_\_\_\_

WORK PHONE \_\_\_\_\_

FAX \_\_\_\_\_

MOBILE PHONE \_\_\_\_\_

E-MAIL \_\_\_\_\_

MILITARY RANK \_\_\_\_\_

ACADEMIC TITLES \_\_\_\_\_

OCCUPATION \_\_\_\_\_

Under my own responsibility I declare that I have not been arrested or convicted of any crimes.

**I authorize the National Institute for the Guard of Honour at the Royal Tombs of the Pantheon to process all my personal information (L. December 31, 1996, n. 675 and D. Lgs. June 30, 2003 n. 196).**

DATE \_\_\_\_\_

SIGNATURE OF CANDIDATE \_\_\_\_\_

SIGNATURE OF RECOMMENDING MEMBER \_\_\_\_\_

SIGNATURE OF DELEGATE \_\_\_\_\_

PRESIDENTIAL APPROVAL \_\_\_\_\_

I submit two passport type photographs in colour and the entrance fee (at minimum) of 50 €.