



..... date

(first and middle names, surname)

.....

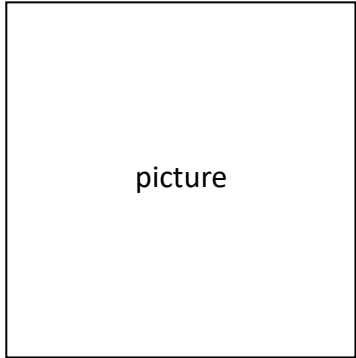
(locality)

address

.....

tel.

e-mail.....



Prior of Confraternity of the St. Stanislaus BM Order
in

I am kindly asking you to affiliate me into the body of Dames and Cavaliers of the Order of St. Stanislaus BM.

At the same time I declare that it is known to me, the fact that, in the event of acceptance my person to the Order of St. Stanislaus BM, in the period between the adoption by the appropriate Chapter the resolution on acceptance of my candidacy and a date of the investiture I will have the statue of postulant with the rights and responsibilities associated with this title.

At the same time, according to the wording of Article 23 section item 1 point 1 and section item 2 of the Personal Data Protection Act of 29th August 1997. (Journal of Laws from 2002, Number 101, item 926, with the subsequent amendments) I hereby give consent for my personal data to be processed by the Confraternity of the St. Stanislaus BM Order my personal data voluntarily given below are for the purposes of statutory activities of the Order.

Birth identification number Father's name.....
 [PESEL]

Mother's name Mother's maiden name

Father's ancestral coat of arms

Mother's ancestral coat of arms

Date of birth Place of birth

Country Voivodeship



Nationality

Religious affiliation Marital status

Ordained a priest, monastic

Name of spouse Names of the children

Education, profession, academic qualification

.....
.....
.....

Membership in chivalric orders and taken up position

.....
.....

I confirm received information that:

1. The administrator of this data is Royal Order of St. Stanislaus BM
2. I am entitled to insight to my data and its correction under the conditions specified in the Act on the Protection of Personal Data

.....

Signature of candidate

Hereby I assure my honor that the candidate is worthy to affiliate into the body of Dames and Cavaliers of the Order of St. Stanislaus BM and I recommend his person to receive Order Class.

Surname and name of recommending

Possessed class of the Order year of investiture

.....

.....

Signature of recommending

Surname and name of recommending

Possessed class of the Order year of investiture

.....

.....

Signature of recommending



Opinion	Commander's signature and stamp
Decision of Priory Chapter	Signature
Date	Locality