



FILACAP

NAME: _____

ADDRESS: _____

CITY: _____ **STATE/PROV:** _____

COUNTRY: _____ **POSTAL CODE:** _____

PHONE: _____ **E-MAIL:** _____

WEB SITE: _____

OCCUPATION: _____ **GENDER:** _____

DATE BIRTH: ____/____/____ **MARITAL STATUS:** _____

PLACE OF BIRTH (CITY/COUNTRY): _____

LANGUAGES: _____

I COLLECT: _____

LITTLE AD (less than 30 words):

I REQUEST:

() Subscription FILACAP – 4 issues + 4 little ads: US\$ 15 / 10 IRC's / €10.

() One Little Ad: US\$ 5 / 3 IRC's / €3.

() Two Little Ads: US\$ 8 / 5 IRC's / €5.

() Information and sample copy: US\$ 2 / 1 IRC / €1.

Issues in March, June, September and December.

PAYMENTS:

The only acceptable forms of payment are: cash (U. S. Dollars or Euro) or IRC (International Reply Coupons) or mint thematic (topical) stamps/blocks – complete sets – at face value.

Please, do not send check or money order.

_____ Date: __ / __ / ____.

Signature

Send to: FILACAP
Caixa Postal 06
Cachoeira Paulista/SP
12630-970 BRASIL

www.filacap.com.br
www.acfilacap.com.br
ac.filacap@uol.com.br