



Global Association for the use of knowledge on Fractured Rock in a state of Stress,  
In the field of Energy, Culture and Environment

**SUPPORT FORM COMPANIES / INSTITUTES**

INSTITUTE / COMPANY	
Name of the Institute/Company	
Address	
Tel	
Fax	
Web Site	
REPRESENTATIVE	
Name-Surname	
Title	
Position	
Work Address	
Home Address	
Tel	Work:
	Home:
	Mobile:
Fax	Work:
	Home:
E-mail	Work:
	Home:

Hereby, the Company/Institute ..... ,  
represented by ..... declares to support SFERA  
for the period ..... for the sum of Euro ..... .

Date: ..... Place: .....

Signature of representative: .....

In function to our support, we give permission to SFERA to use our Company/Institute name and  
logo in its publications, promotion material and web-site during the period ..... .

Date: ..... Place: .....

Signature of representative: .....

**PLEASE PERFORM PAYMENT OF THE SUPPORT SUM THROUGH BANK WIRE TRANSFER TO SFERA AS FOLLOWS:**

**SFERA's Bank details**

Account number: 348771  
Bank: CREDITO ITALIANO, Corso Marruccino, 66100 Chieti (Ch), Italy  
Bank Codes: ABI Code 2008; CAB Code 15500; SWIFT Code: CRITITMMPEX

**PLEASE FAX THE COMPLETED AND SIGNED FORM ACCOMPANIED BY A COPY OF THE BANK WIRE TRANSFER TO:**

**FAX: ++ 39 085 9231888**