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|  | | | | | | | | | | | | | | | | Sello de Registro | | | | | | |
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|  | **SOLICITUD PARA LA CONVOCATORIA DE SUBVENCIONES 2025**  **JUVENTUD, INFANCIA Y ADOLESCENCIA** | | | | | | | | | | | | | | | | | | | | | |
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|  | **DATOS DE LA ASOCIACIÓN** | | | | | | | | | | | | | | | | | | | | | |
|  | Nombre | |  | | | | | | | | | | | CIF | | | | |  | | | |
|  | Dirección | |  | | | | | | | | | | | | | | | | | Nº |  | |
|  | Portal |  | | Bloque | |  | Escalera | |  | | Piso |  | Puerta | | | |  | | | | Local |  |
|  | Localidad | |  | | | | | | | | | | | | | | | | | | | |
|  | Provincia | |  | | | | | | | | | | | | Código Postal | | | | | |  | |
|  | Teléfonos | | | |  | | | | |  | | | | | FAX | | |  | | | | |
|  | Correo electrónico | | | |  | | | | | | | | | | | | | | | | | |

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| **DATOS DEL PRESIDENTE DE LA ASOCIACIÓN** | | | | | | | | | | | | | | | | | | | |
| Nombre | |  | | | | | | | | | | DNI | | | |  | | | |
| Dirección | |  | | | | | | | | | | | | | | | Nº |  | |
| Portal |  | | Bloque | |  | Escalera |  | | Piso |  | Puerta | | |  | | | | Local |  |
| Localidad | |  | | | | | | | | | | | | | | | | | |
| Provincia | |  | | | | | | | | | | | Código Postal | | | | |  | |
| Teléfonos | | | |  | | | |  | | | | | FAX | |  | | | | |
| Correo electrónico | | | |  | | | | | | | | | | | | | | | |

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| **EXPONE:** |
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| Que enterado de la convocatoria efectuada por el Concejal Delegado de Juventud, infancia y adolescencia presenta la documentación necesaria para optar a dicha convocatoria |
|  |
| **SOLICITA:** |
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| Tengan en cuenta la misma |

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| **DIRECCIÓN DE NOTIFICACIÓN** (Rellenar solo en el caso que sea distinta a la del solicitante) | | | | | | | | | | | | | | |
| Dirección | |  | | | | | | | | | | Nº |  | |
| Portal |  | | Bloque |  | Escalera |  | Piso |  | Puerta | |  | | Local |  |
| Localidad | |  | | | | | | | | | | | | |
| Provincia | |  | | | | | | | | Código Postal | | |  | |

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| **FORMA PREFERENTE DE CONTACTO** | | |
|  | Correo postal |  |
|  | Teléfono |  |
|  | Fax |  |
|  | Correo electrónico |  |
|  | Recoger personalmente |  |
|  | Otros medios |  |

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| **FIRMAS** | | | | | | |
|  | |  |  |  |  |  |
| Alcobendas, a | |  | de |  | de 2025 |  |
|  | |  |  |  |  |  |
|  | **Firma y Sello de la Entidad** | | | | | |

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| * 1. SR. CONCEJAL DELEGADO DE JUVENTUD, INFANCIA Y ADOLESCENCIA DEL AYUNTAMIENTO DE ALCOBENDAS |

**Política de Protección de Datos**

Los datos personales recogidos serán incorporados y tratados en el fichero REGISTRO, inscrito en el Registro de la Agencia Española de Protección de Datos. El

órgano responsable del fichero es el AYUNTAMIENTO DE ALCOBENDAS, y la dirección donde podrá ejercer los derechos de acceso, rectificación, cancelación y

oposición ante el mismo es REGISTRO, Plaza Mayor 1, 28100 Alcobendas. Todo lo cual se informa en cumplimiento del artículo 5 de la Ley Orgánica 15/1999, de 13

de diciembre de Protección de Datos de Carácter Personal.