## **Application for Membership**



Licht für Kinder e.V. Mittelweg 30 91224 Pommelsbrunn

Web: <u>www.licht-fuer-kinder.de</u> E-Mail: <u>info@licht-fuer-kinder.de</u>

preferred by email: aufnahme@licht-fuer-kinder.de

Company and form of organization (if appropriate)				
Last Name, Owner / Director (if appropriate)	First Name		Date of Birth	
Street				
Postal Code	City	City		
email:				
Type of Membership	1 = Full Member 2 = Sustaining Member			
Direct debit order (when paying by direct debit, otherwise invoice)				
Last Name, First Name of Account Owner				
Financial Institution				
IBAN		BIC		
Annual membership (according to the Membership Fee Regulations)		Optional additional donation: one-time  ononthly  yearly  Please specify amount:		
I authorize the association "Licht für Kinder e.V." revocable to debit the contributions from the above account or from another account, which I will inform the association about in the future, by direct debit.				
Date, Signature				
The application is deemed to be accepted upon receipt of the contribution invoice or by direct debit. With my signature, I accept the statutes, the Membership Fee Regulations and the association arbitration rules in their currently valid version. I authorize the association to collect due contributions from my account by direct debit. I am aware that membership is independent of the assumption of any association offices and functions. I agree that the data related to the membership applied for will be stored insofar as this is necessary for the association's usual support or the proper implementation of the contractual relationships. The provisions of the Data Protection Act remain unaffected.				
City, Date				
	Signature			