

Declaration of accession with SEPA direct debit mandate
**Association Help for Boa Vista/Ajuda para Boa Vista eV,
Germany**



I hereby declare my membership of the association from _____

Help for Boa Vista/Ajuda para Boa Vista eV, Goethestrasse 37, 35510 Butzbach

I would like (please tick)

Active member, annual fee 40.00 Euro

Passive member, annual fee 20.00 Euro

become.

Name: _____ First name: _____

Date of birth: _____ Street: _____

ZIP code: _____ Location: _____

Phone: _____ E-mail: _____

By my signature I acknowledge the statutes of the association.

Place, Date Signature of the member (or legal representative)

Issuing the SEPA direct debit mandate



Creditor identification number of the association: DE06ZZZ0002183816

Mandate reference/membership number: _____ (will be entered by the association)

I authorize the association Help for Boa Vista/Ajuda para Boa Vista eV Goethestraße 37, 35510 Butzbach, Germany. To collect payments from my account on a recurring basis by direct debit. At the same time, I instruct my bank to honour the direct debits drawn by the association on my account. According to the statutes, the membership fee is due as an annual fee on January 1st of each year.

A notice:

I can request a refund of the amount charged within eight weeks from the debit date. The conditions agreed with my credit institution apply.

credit institution: _____ BIC: _____
IBAN: _____
Account holder: _____

Place, Date Signature of member / account holder