

Declaration of Accession

I hereby declare my membership in the association "Helfen am Ursprung e.V." with effect from the first of next month.

My personal data are:

First name _____ Last name _____

Address _____

Email _____

Telephone number _____

Date, signature _____

Helfen am Ursprung e.V., 82347 Bernried

Creditor identification number DE56ZZZ00002509030

Mandate reference _____

SEPA direct debit mandate

I authorize the association Helfen am Ursprung e.V. to collect membership fees from my account by direct debit. The amount of the membership fees is determined at the general meeting (currently 75 Euros per year).

At the same time, I instruct my bank to honour the direct debits drawn on my account by the association Helfen am Ursprung e.V .

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

First name and last name (account holder)

Street and house number

Zip code and city

_____ | _____ | _____
Credit institution

_____|_____|_____|_____|_____|_____
IBAN

BIC/SWIFT code