

Friends of Chepel e.V. c/o Susanne Kraft Sachsenbuckelstr. 6 D - 64646 Heppenheim $\hbox{E-Mail:} \ \underline{info@friends-of-chepel.de}$

Bank Account:

Sparkasse Starkenburg IBAN: DE48 5095 1469 0010 4906 31

BIC: HELADEF1HEP

MEMBERSHIP APPLICATION

Herewith I declare my joining to the charity organisation Friends of Chepel e.V.:	
Name, First name	
Address	
Post code, place	
Phone number (optional)	
E-Mail address	
I / We want to join as	
Single person Student, trainee, retiree (Please underline the appropriate) Family	O (Annual premium: 30,- €) O (Annual premium: 15,- €)
	O (Annual premium: 50,- €)
Individually chosen annual premium	O with an amount of €
Place, date	Signature
The termination of the membership is possible in writing with comes into effect according to the statutes of the charity organ	n a time limit of 1 month to the end of the year, the termination isation.
 I transfer the annual premium to the above I legitimate Friends of Chepel e.V., to inse account. This is valid until cancelled in wri 	ert my annual premium from my below given bank
Bank account owner:	
IBAN:	
BIC:	
Place, date	Signature