



c/o Steuerberater Ehret, Erlenstraße 18, 73663 Berglen, Germany

Application for Supporting Members

| | |
|-------------------|--|
| Surname, name | |
| Date of birth | |
| Address | |
| Postal code/ Town | |
| Phone | |
| Fax | |
| E-mail | |

I hereby, apply to become a supporting member of the non-profit Organisation, Ocean Sounds e.V.' VR 721563. The annual subscription amounts to 20,00 € and will be debited on the 1st of December each year.

Place, Date, Signature

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(Minors will need the signature of a legal representative)

SEPA-Direct Debit Mandate

Identification number of creditor: Mandate reference: Annual subscription

I hereby authorise the organisation 'Ocean Sounds e.V.' to debit payments from my bank account. At the same time, I will instruct my financial institution to cash the direct debit in support of 'Ocean Sounds e.V.'

Note: Within eight weeks, starting with the charging date, I am entitled to request a refund of the charged amount under the terms and conditions of the financial institution.

Financial Institution: Bank Code: BIC:

Account Holder: Account Number:

IBAN:

During the membership this information will be saved electronically for the management of the organisation only.

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(Place) (Date) (Signature)

(For minor members, the signature of a legal guardian is mandatory. The legal guardian agrees to assume the payment of contribution until the child attains full age.)