## **SEPA Direct Debit Mandate**

## Deutsche Killifisch Gemeinschaft (German Killifish Association)

office – Friedhofstr. 8 – D-88448 Attenweiler - Germany - geschaeftsfuehrer1@killi.org Creditor-Identification-Number: DE45ZZZ00000149024

Mandate reference (= Membership-number)		
Annual Payment	One-Off-Payment	
By signing this mandate form, I authorise the Deutsche Killifisch Gemeinschaft e.V. to send instructions to my bank to debit my account. The bank is to debit my account in accordance with the instructions from the Deutsche Killifisch Gemeinschaft.		
	refund from my bank under the terms and conditions of my st be claimed within 8 weeks from the date at which my	
surname:		
first name:		
street and number:		
country, postal code, and city:		
IBAN: LIIII LIII L		
	<del></del>	
BIC: (9 or 11 letters / numbers)		
The payment of the membership fee is or January each year.	nly possible by direct debit. The direct debit will be done in early	
(city, date and signature)		
Please send this origin application with Friedhofstr. 8, D-88448 Attenweiler, Gern	n the SEPA Direct Debit Mandate to Dr. Thomas Litz, nany	
How did you find out about us?		

## **Deutsche Killifisch Gemeinschaft e.V. Application for Membership**



Hereby I am applying for membership of the Deu Association) as a paying member	tsche Killifisch Gemeinschaft e.V. (German Killifish
full-membership 40,00 Euro p.a.	
extra family-member 10,00 Euro p.a. (name	and number of 1st member is needed)
pupil/student 20,00 Euro p.a. (valid school m	embership document is needed)
from	
1st January 20 OR	1st July 20
My personal data (* = mandatory field):	
Surname*:	Date of Birth*:
First Name*:	Profession:
Street, Number*:	Phone:
Postcode/Zip + City*:	Country*:
email*:	
By signing this application form**) I acknowledge that to receive the DKG-Journal, the bulletin DKG-Aktuel participate in the fish-and-egglist. Furthermore I promor email whenever there is a change of postal addres I am aware that I have to pay for expenses caused be acknowledge that my personal data as well as the storage media and that the DKG is obliged to comphone number and email address to the association from all data storage media after I have left the association agree to the registration of my data within the club and to the publication of my name and postabulletin DKG-Aktuell.	I, a membership list and the By-Laws, as well as to hise to inform the 1 <sup>st</sup> Secretary of the DKG by a letter is or if I want to end my membership.  By late payment of my membership fee. Additionally, I se concering my bank account are saved on data municate exclusively my name, my postal address, it's members. The DKG will delete my personal data diation.  By late DKG will delete my personal data diation.  By late DKG will delete my personal data diation.  By late DKG by a letter was a killifish.
Place, Date, Signature	

<sup>\*\*)</sup> Signature of parent or legal guardian for a person under age