

## Membership Application

I hereby apply for membership in the Altruismus e.V.



Last Name \_\_\_\_\_  
First Name \_\_\_\_\_  
Date of Birth \_\_\_\_\_  
Address \_\_\_\_\_  
Postal Code, City \_\_\_\_\_  
Profession \_\_\_\_\_  
E-Mail Address \_\_\_\_\_  
Telephone Number \_\_\_\_\_

Acceptance to the association only by decision of the board.

I am interested in playing an active role in the association: Yes / No

## Privacy Policy

Altruismus e.V. processes information about members. By signing this form you are giving consent for your personal and sensitive information to be processed under the rules laid down by applicable data protection law. Information about members will never be shared with third parties.

## Membership Contribution

Each member contributes at least 5€ per month.

Contribution Amount \_\_\_\_\_ per month  
Departement \_\_\_\_\_  
Departement Contribution Amount \_\_\_\_\_ per month  
Attracted by (ID-Number) \_\_\_\_\_

Contributions and Departement Contributions will be automatically debited (note page two of this form).

## Articles of Association

The articles of this association can be found on its website [www.altruismus-ev.de](http://www.altruismus-ev.de). By signing this document I accept the Altruismus e.V. statutes in their currently applicable version. The Altruismus e.V. membership is continuous and may be cancelled at any time under observance of a period of notice of one month.

\_\_\_\_\_  
Place, Date

\_\_\_\_\_  
Signature

Gut Holzfeld Holzfeld 2 95126 Schwarzenbach an der Saale / Germany	1. Vorstand - Herr Amir Nasser Tel.: +49 (0) 176 97 66 52 39 E-Mail: <a href="mailto:info@altruismus-ev.de">info@altruismus-ev.de</a> Website: <a href="http://www.altruismus-ev.de">www.altruismus-ev.de</a>	Amir Nasser IBAN: DE84700530700031934417 BIC: BYLADEM1FFB
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# Automatic Debit Transfer

Account Holder \_\_\_\_\_  
IBAN \_\_\_\_\_  
BIC \_\_\_\_\_

By signing this form, I authorize Altruismus e.V. to debit the account held at the financial institution indicated on this agreement, the membership contribution noted above.

Frequency of debits: monthly/semi-annual/annual

In case noted account is not covered, the bank will not be obligated to honor the amount due. All bank fees which may occur in that case are at the account holder's cost.

The direct debit authorisation may be revoked in writing at any time.

\_\_\_\_\_  
Place, Date

\_\_\_\_\_  
Signature

Gut Holzfeld  
Holzfeld 2  
95126 Schwarzenbach  
an der Saale / Germany

1. Vorstand - Herr Amir Nasser  
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