

Membership Agreement



Albert-Ludwigs-Universität Freiburg
Alumni Freiburg e.V.
Geschäftsstelle
Haus „Zur lieben Hand“
Löwenstraße 16

79098 Freiburg

I would like to apply for a membership to Alumni Freiburg e.V.

By joining Alumni Freiburg e.V. you agree to have your data stored in an address file. Alumni Freiburg pledges to use the data exclusively for internal purposes. If you donate at least 55 euros you may request to receive a receipt for your donation. To apply for a membership to Alumni Freiburg e.V., please fill out this form, print it out, and send it to us to the address listed above.

Personal Data

Last Name _____ Name at Birth _____

First Name _____ Title _____

Date of Birth _____ Profession _____

Nationality _____

Street Address _____ Postal Code/Town _____

County _____

Phone/Fax _____ E-Mail _____

Years Studied at the University of Freiburg

Period: From _____ To _____

Fields of Study: _____ Degree _____

Former Employee at the University of Freiburg

Period: From _____ To _____ Department _____

I would like to receive more information about Alumni Freiburg

Date, Place

Signature

Membership Agreement



Mode of Payment

How would you like to pay the yearly membership dues of at least €55?

- I would like to issue Alumni Freiburg e.V. a direct debit authorization
- I would like to pay by credit card
- I will transfer the sum to the account of Alumni Freiburg e.V.

Direct Debit Authorization

Yearly Dues _____
(at least 55€)

SEPA-Direct Debit Mandate – Creditor identifier: DE30ZZZ00000030760

By signing this mandate form, you authorize Alumni Freiburg e.V. to send instructions to your bank to debit your account in accordance with the instructions from Alumni Freiburg e.V. As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which your account was debited.

Account holde (name, surname) _____

Street Address _____

Postal Code/Town _____ Country _____

IBAN _____ Name of Bank _____

BIC _____

Credit Card

Yearly Dues _____
(at least 55€)

Type Euro/Mastercard Card Holder _____

Visa Credit Card No. _____

Other: _____ Card Good Thru _____

Transfer

Volksbank Freiburg

Acct. No.: 12 747 500

BLZ 680 900 00

Keyword: „Alumni Freiburg“

SWIFT-BIC: GENO DE 61 FR1

IBAN: DE85680900000012747500

Sparkasse Freiburg Nördlicher Breisgau

Acct. No.: 14 001 600

BLZ 680 501 01

Keyword: „Alumni Freiburg“

SWIFT-BIC: FRSPDE 66

IBAN: DE92680501010014001600

Date, Place

Signature