Per E-Mail an / By e-mail to kassenwart@denog.de

Änderungen Fördermitgliedschaft DENOG e. V. / Changes sustaining Membership DENOG e. V.

The German version is legally binding. The English translation is for convenience only.

Mitgliedsnummer (falls zur Hand) / Membership number (if available)

Bisheriger Firmenname (bei Umfirmierung) / Previous company name (in the event of a change of name)

Stammdaten / Company and Personal Details

Anrede / Salutation

Vorname / First name

Nachname / Last name

Firmenname / Company name

Straße und Hausnummer / Street and house number

Postleitzahl / Postal code

Ort / City

Land / Country

Fördermitgliedschaftsbeitrag / Supporting membership fee:

Höhe des jährlichen Fördermitgliedschaftsbeitrags (min. 500,00€) / Amount of the annual sustaining membership fee (min. €500.00)

☐ Ich stimme der Speicherung, Verarbeitung und Nutzung meiner personenbezogenen Daten zu, soweit dies für Vereinszwecke erforderlich ist. / *I consent to the storage, processing and use of my personal data insofar as this is necessary for the purposes of the association.*

Ort, Datum / Place, date

Unterschrift / Signature

SEPA-Basis-Lastschriftmandat (Wiederkehrende Zahlungen) / SEPA Core Direct Debit Mandate (Recurrent Payments)

Ich ermächtige DENOG e. V. (Gläubiger-Identifikationsnummer „DE48ZZZ00002124472“) Zahlungen von meinem Konto mittels Lastschrift einzuziehen. Zugleich weise ich mein Kreditinstitut an, die von DENOG e V. auf mein Konto gezogenen Lastschriften einzulösen. / *I authorise DENOG e. V. (creditor identifier “DE48ZZZ00002124472”) to collect payments from my account by direct debit. At the same time, I instruct my bank to honour the direct debits drawn on my account by DENOG e. V.*

Falls abweichend: Kontoinhaber/Zahlungspflichtiger (Vor- und Nachname/Firma, vollständige Adresse) / If different: account holder/debtor (first and last name/company, full address)

BIC

Bank

IBAN

Hinweis: Ich kann innerhalb von acht Wochen, beginnend mit dem Belastungsdatum, die Erstattung des belasteten Betrags verlangen. Es gelten dabei die mit meinem Kreditinstitut vereinbarten Bedingungen. / *Note: Within eight weeks, starting from the date on which my account was debited, I can request a refund of the amount debited. The terms and conditions agreed with my bank apply.*

DENOG e. V.
Schlesierstr. 14
85368 Moosburg a.d.Isar
Germany

E-mail: vorstand@denog.de

Bankverbindung / Bank details
Frankfurter Volksbank eG
IBAN DE66 5019 0000 6700 4888 94
BIC FFVBDEFFXXX

VAT ID: DE319546939

Vorstand i. S.d. d. § 26 BGB / Board pursuant to § 26 BGB
Patrick Bußmann (Chair)
Moritz Frenzel (Deputy Chair)
Tim Kleefass (Treasurer)

Eingetragener Verein / Registered association
Amtsgericht / Local Court Frankfurt am Main, VR 16234

Per E-Mail an / By e-mail to kassenwart@denog.de

Ort, Datum / Place, date

Unterschrift / Signature

Contacts

Billing Contact

E-mail address for invoices

If desired: PO or reference to appear on the invoice

Person 1

Person 1: Salutation

Person 1: First name

Person 1: Last name

Person 1: E-mail address

Inclusion in the general communication of DENOG e.V. ("member-announce" mailing list), as well as:

☐ Additional inclusion in the closed e-mail list for members of DENOG e. V. ("member" mailing list)

Person 2

Person 2: Salutation

Person 2: First name

Person 2: Last name

Person 2: E-mail address

Inclusion in the general communication of DENOG e.V. ("member-announce" mailing list), as well as:

☐ Additional inclusion in the closed e-mail list for members of DENOG e. V. ("member" mailing list)

Person 3

Person 3: Salutation

Person 3: First name

Person 3: Last name

E-mail address

Inclusion in the general communication of DENOG e.V. ("member-announce" mailing list), as well as:

☐ Person 3: Additional inclusion in the closed e-mail list for members of DENOG e. V. ("member" mailing list)