

Trans Recht e.V.
c/o Rat & Tat-Zentrum
Theodor-Körner-Straße 1
28203 Bremen

★ Membership Application

I would like to support the work of Trans Recht e.V. and hereby apply to become a member of the association:

last name, first name (preferred):

date of birth: _____

street & house number: _____

postal code & city: _____

e-mail: _____

phone number: _____

bank account details:

Trans Recht e.V.

DE84 2905 0101 0080 9885 79

BIC: SBREDE22XXX

continue on the inside...

★ ...continuation of membership application

I want to pay the following annual membership fee:

24 € 60 € 120 € ____ €

I pay the annual membership fee

quarterly half-yearly yearly

The annual membership fee must be at least 24 € and will be charged at the beginning of the quarter/half-year/year depending on the payment method. I agree to the electronic recording of my data. This data will not be passed on to third parties.

_____ place, date

_____ signature

SEPA direct debit mandate:

Creditor ID: DE66ZZZ00001419443

Mandate reference will be communicated separately.

I authorize Trans Recht e.V. to collect the membership fee from my account by direct debit. At the same time, I instruct my bank to redeem the direct debits drawn by Trans Recht e.V. from my account.

Note: I can request reimbursement of the debited amount within eight weeks of the debit date. The conditions agreed with my bank apply.

account holder, if different:

street & house number: _____

postal code & city: _____

IBAN:

____ / ____ / ____ / ____ / ____ / ____

BIC:

____ / ____

_____ place, date

_____ signature

You are also welcome to set up a standing order in favor of Trans Recht e.V. instead of the direct debit authorization (bank details opposite).

Simply fold it, put it in a window envelope and send it to us!