

ERDING



MALLARDS

Baseballverein Erding Mallards e.V.
Postfach 1119
85421 Erding

MEMBERSHIP APPLICATION / SEPA Direct Debit Mandate

I hereby apply for membership in the Baseballverein Erding Mallards e.V.

FAMILY NAME

DATE OF BIRTH

GIVEN NAME

GENDER

STREET ADDRESS

NATIONALITY

POSTAL CODE / CITY

MOBILE PHONE NUMBER(s)

(if parent's number, please state whose)

EMAIL (Invitations are only sent electronically, as stated in the statutes)

TELEPHONE

UNIQUE MANDATE REFERENCE (to be filled out by the club)

<input type="checkbox"/> Passive supporter	<input type="checkbox"/> Child below 16 years of age
<input type="checkbox"/> Youth between 16 & 18 years of age	<input type="checkbox"/> Student or apprentice
<input type="checkbox"/> BBQ player	<input type="checkbox"/> Adult player above 18 years of age
<input type="checkbox"/> Quarterly payment	<input type="checkbox"/> Semi-annual payment
	<input type="checkbox"/> Annual payment

For a deducted fee (children, students, apprentices, civil- or military service), please enclose the necessary documents to validate the claim.

As a member, I acknowledge and accept the club's statutes and membership fee regulations (downloadable from <https://www.erding-mallards.de/en/about-us/join-us/>).

Privacy protection:

The separate Data Protection Declaration must be signed and presented as well.

X

DATE

X

SIGNATURE (for underage members: parent or guardian)

I hereby authorize the Baseballverein Erding Mallards e.V to send instructions to your bank to debit your account for all valid fees and allocations, using the SEPA Direct Debit Mandate with the Creditor Identifier **DE64ZZZ00000681794**.

IBAN

BIC

ACCOUNT HOLDER

X

DATE

X

SIGNATURE OF ACCOUNT HOLDER