



Internationale Gemeinschaft für Labyrinthfische (IGL)

Declaration to: Karl-Heinz Rossmann, Kleingemünder Straße 44
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Membership Application

IGL-No.:

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(Please do not fill in)

I would like to apply for membership at the **Internationalen Gemeinschaft für Labyrinthfische (IGL)** as

Single member. Family member. Teen / student.

Name, first name: _____

Street, house number: _____

Zip code, city: _____

Country: _____

Phone private / at work: _____ // _____

Mobile / Fax: _____ // _____

Email: _____

Date of birth / Occupation: _____ // _____

The once-only admission fee is € 6,00. Teens and students are exempt from the admission fee.
The membership is valid after the payment of both, admission and membership fee.

With its membership the applicant accepts the terms and conditions as well as the exchange regulations of the IGL as binding. With signing the form, the applicant acknowledges that the IGL will save their personal data using it exclusively as stated in the terms and conditions.

City, date: _____ Signature: _____
(Minors need parental consent / signature)

Direct debit authorisation

Name, first name: _____

IGL-No.:

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(Please do not fill in)

I hereby authorise the IGL to annually debit my account until cancellation:

- € 35,00 for single membership. € 41,00 for family membership.
 € 18,00 for teen and student membership. € 6,00 for once-only admission fee.

Bank: _____

Account number / Sort code: _____ // _____

Name of account holder: _____

City, date: _____ Signature: _____
(Minors need parental consent / signature)

Banking details: **Deutsche Bank AG, D-79618 Rheinfelden, Germany**
Account: 146 526 900 IBAN: DE50 6837 0024 0146 5269 00
BLZ: 683 700 24 BIC: DEUT DEDB 683