

MEMBERSHIP APPLICATION



I hereby apply for a binding registration as a member of the James Bond Club Deutschland e.V.

Personal Details

First name* _____

Surname* _____

Date of birth* _____

Address* _____

Postcode/City* _____

Country* _____

Telephone* _____

E-Mail* _____

* mandatory fields

- I will transfer the annual membership fee of EUR 50,- to the account of the James Bond Club Deutschland e.V. at Sparkasse Rhein-Haardt, IBAN DE63 5465 1240 0005 385786 BIC MALADE51DKH
- I will transfer the annual membership fee of EUR 50,- to the Paypal account of the James Bond Club Deutschland e.V. PayPal@james-bond-club.de

The membership begins as soon as the money transfer is established. It is valid for the calendar year in which the member has joined, irrespective of the day of joining.

By submitting this form, I agree to the statutes of association of the James Bond Club Deutschland e.V. The statutes can be found online at www.james-bond-club.de/satzung.

Date

Member's signature

- I am under 18 years old. My parents agree to my membership in the James Bond Club Deutschland e.V.

Signature of parent

Please send this application form to: James Bond Club Deutschland e.V., Mittelpfad 1, 67273 Bobenheim am Berg, or scan and send by e-mail to: vorsitz@james-bond-club.de