

HPG
Helmuth Plessner Gesellschaft e.V.

Membership Application Form

I hereby apply for membership of HPG:

Title:

2nd, 1st name:

Date of birth:

E-Mail address:

Home address:

Office address:

I request the concessionary rate (please add a reason and/or proof):

I hereby confirm that I have read and fully understood the Society's private policy including the use of personal data.

The executive committee prefers to contact you via E-mail

- I agree
- I do not agree

The current annual membership fee (€52,-; reduced €25,-)

- will be transferred to the HPG account (stated below) by 15 December of the respective financial year at the latest.
- should be paid via bank collection on 15 December of the respective financial year. (HPG will withdraw the annual dues automatically from your bank account until cancellation). Please add the signed mandate.

Date:

Signature

[Please send this application to the current office address; see <https://helmuth-plessner.de/impressum/>]

HPG
Helmuth Plessner Gesellschaft e.V.

Creditor identification number: DE68ZZZ00001 095718

SEPA-Lastschriftmandat

I hereby authorize the Helmuth Plessner Society to deduct the membership fee as listed above when it's due. At the same time, I instruct my credit institution to accept the direct debits collected.

Note: I can demand reimbursement of the debited amount within 8 weeks, starting from the date of debit. The conditions agreed with my credit institution apply.

Name: _____

Street: _____

Post Code/City: _____

Account Holder: _____

IBAN: _____

BIC: _____

Date: _____

Signature