

Membership Application Kunstverein Braunschweig e.V.

Yes, I wish to become a member of the Kunstverein Braunschweig e.V. and hereby submit my application.

_____ Normal membership	€ 60,00/year
_____ Discounted membership (freelance artists, schoolchildren, students, unemployed, people with disabilities)	€ 30,00/year
_____ Family membership	€ 100,00/year
_____ Corporate membership	€ 150,00/year
_____ Supporting membership plus membership fee	from € 250,00/year

Company, Name, First Name

Street/Postal Code/Place of Residence

Email

Date/Signature

SEPA Direct Debit Mandate:

Payee: KUNSTVEREIN Braunschweig e.V., Lessingplatz 12, 38100 Braunschweig
Creditor Identifier DE89ZZZ00000634881
Mandate reference number: Your membership number

Name of the payer (account holder): _____

Payer's account (IBAN): _____

Payer's credit institution (BIC): _____

I/We hereby authorize the KUNSTVEREIN Braunschweig e.V. to debit the amount given above from the named account. At the same time I/we authorize my/our credit institution to honour direct debits from the KUNSTVEREIN Braunschweig e.V. Note: I/We can request a refund of the amount paid within eight weeks, effective from the date of the debit. The conditions agreed upon with my/our credit institution are in effect. The bank debit (due date) of the sum follows one week after the membership confirmation has been sent. The sum for future years will be debited on 1 February.

Place, Date

Signature of the payee (account holder)

Please fill out and return to:

Kunstverein Braunschweig e.V. | Lessingplatz 12 | 38100 Braunschweig