

## Application for membership of the association Muzuganda e.V.

I hereby apply:	
surname, first name, date of birth	
street, street number	
postcode, city, country	
telephone	
e – mail address	
from for membership of the	association Muzuganda e.V.
The articles of association were handed over to me and I recognize	ze these.
I will transfer the annual membership of $\in$ to	the following bank account:
Name: Muzuganda, Uhlenhorst 16, 21493 Schwarzenbek, Germa IBAN: DE86 2305 2750 0081 3997 92 BIC / Swift: NOLADE21RZB	ny
Banking institution: Kreissparkasse Herzogtum Lauenburg, Am I	Markt 4-5, 23909 Ratzeburg, Germany
In case of a reduced membership fee: I will submit a copy of a prepensioner's card for instance).	oof of eligibility (such as a
I agree with the storage, transmission, and processing of my persassociation in accordance with the German Federal Data Protection	
date member's signature	
Concerning the admission of minors (children/teenagers unde	er the age of 18)
Herewith I authorize the admission of	•
name, date of birth) to the association Muzuganda e.V. (registere	
(date) and assume the liabilities and obligation reaches majority.	ons to the association until he/she
legal guardian's signature	