in the banking contract.

Gneisenaustr. 2a 10961 Berlin Telefon: 215 9000

www.seitenwechsel-berlin.de info@seitenwechsel-berlin.de



I apply for myself or my child to be admitted to the sports club Seitenwechse The contribution rules from 01.06.2019 can be read on the website.	el e.V. as of entry date (mor	onth(vear)	
The contribution rules from \$1.50.2015 can be read on the website.	chity date (nor	onunyear)	
urname first name (if a		oplicable self-chosen)	
(if applicable surname, first name of a parent or legal guardian)		date of birth	
street and house number postcode city	_	How did you become aware of Seitenwechsel (please select a checkbox – multiple answers possible)	·
Telephonnumber E-Mail (for information on articles, cancelled session	ns, invitation to the plenary assembly, news	□ Homepage □ Social Media □ Friends/Acquaintances	
1. Sports group (name of the offer, trainer, weekday, time)		Events Others	
2. Sports group (name of the offer, trainer, weekday, time)			
For the annual statistics of the LSB, please indicate: My gender is	female male	(please indicate self-designation if appl	icable).
The data is electronically recorded and processed within the framework of the association parties club Seitenwechsel e.V. does not have its own sports facilities. The sport has no influence on officially specified closing times and restrictions of use. In the calculate holidays if the offers can take place during the holidays. The withdrawal must be made in a written form. Tacit absence from the sports of period of notice is 2 months from receipt of notice to the end of the following month (in case of arrears with contributions of more than one half-yearly contribution despite.) During the offers and at association parties, sometimes photos or video recordings of the internet presence of our club. If you do not agree with the pictures, please inform If the first name given in the declaration of entry does not correspond to the civil regist. I have read the statutes and accept them. I also agree to the declaration of consent regarding data protection. (Both can be read on the website.) SEPA Direct Debit Mandate I authorise Seitenwechsel e.V. to collect payments from my account by direct debit. A bank to collect the direct debits drawn by Seitenwechsel e.V. on my account. Any changes to the bank details must be communicated to the sports club in writing Members of the club will be required to pay any bank charges resulting from failure to funds in the account or unlawful chargebacks.	ts halls and sports fields are given culation of contributions, the lost tire offers does not constitute a termine.g. receipt of notice 10.07 leaving the reminder, the exclusion from the offers the activities are taken. The use the photographers immediately on stered name, there must be no interplace, date At the same time, I instruct my before the next payment deadline.	n to the club for use by the district offices and the senate. The sprime during holidays was taken into account. Please ask the trained mation and does not release from the obligation to pay contributing date 30.09.). The association can take place (according to §6 No. 1a or 2c of the set of these pictures is limited to the press, public relations, sponsor make sure that no pictures are taken of you or your children. It is to deceive or fraud. Signature I authorise Seitenwechsel e.V. to collect payments from my according to §6 No. 1a or 2c of the set of these pictures is limited to the press, public relations, sponsor make sure that no pictures are taken of you or your children.	ers before ions. The statutes) rship and ecount by direct club mus s before iilure to.
		The scaling of contributions depends on net income and is on self-assessment in categories I - III. For Cat. IV, the reduct application and proof are required.	
	n appears on the account ed and is DE34ZZZ00000329060.	D. I. Net income til bis 1500 Euro	
BIC Name of the credit institution		II. Net income til of 1500 Euro til 2000 Euro III. Net income over 2000 Euro IV. Net income under 900 Euro (Please enclose discount application and proof)	
Name first arms of the annual belief		The amount is to be debited as follows:	
Name, first name of the account holder	_	monthly	
Date Signature of the account holder Note: According to legal regulations, the name in the SEPA Direct Debit Mandate must correspond	ond to the name	quarterly half-yearly annually Status	s: 11/2019