



Submission to the school administration or send to: foerderverein@dis-accra.org

Application for membership of the Non-Profit Support Association of the German International School Accra (Förderverein der Deutschen Internationalen Schule Accra e.V.)

Current connection to the school:

☐ Parent ☐ Employee ☐ Alumni ☐ Support Project „Lieblingszahnarzt“ ☐ Other Sponsors

I hereby submit the application for membership in the Non-Profit Support Association of the German International School Accra as a

☐ personal member with an annual fee of _____ € (Minimum 12 €)
☐ company member with an annual fee of _____ € (Minimum 120 €)

Name, First Name* _____

Company _____

Address _____

Date of Birth _____

Phone number _____

E-Mail _____

*In the case of the company, please specify the person authorized to represent the company .

I agree to the collection, storage and processing of my data as part of the membership. For details on data protection and our statutes, please refer to the homepage www.gis-accra.org/Foerderverein.

Date

Signature

SEPA Direct Debit Mandate

Creditor Identification Number: DE47ZZZ00002794566

Mandate reference: (will be communicated separately)

I authorize the „Förderverein der Deutschen Internationalen Schule Accra e.V.“ to collect recurring payments from my account by direct debit on January 1st of each year. At the same time, I instruct my bank to redeem the direct debits drawn into my account by the „Förderverein der DISA e.V.“. Note: I can request a refund of the debited amount within 8 weeks, starting from the debit date. The conditions agreed with my bank apply.

If you join during the year, the entire annual fee is due when you submit the application of membership and will be collected promptly after joining.

Name Account holder _____

Name Bank _____

IBAN _____

BIC _____

Date

Signature