

I apply for a membership in the association
„Korneli Verein e. V.“.

Member type: Adult: () 28 € p.a. Adult (older than 18 years)
Family: () 40 € p.a. with at least one child at home*
Student: () 10 € p.a. Student (age 18-27 years)

Surname, Name: _____

* Family members _____

Street, No.: _____

ZIP code: _____

City/Country: _____

Profession/work: _____

Born date/place: _____

Phone number: _____

e-mail: _____

I want to contribute to the association by

Signature

Date

Please send your signed application back to service@korneli-online.de.