



Nepalmed e.V.
 c/o Dr. Arne Drews
 Straße des Friedens 27, D - 04668 Grimma
 Tel + 49 3437 910329, Fax + 49 3437 910160
 Volks- und Raiffeisenbank Muldentale eG
 IBAN: DE67 8609 5484 5000 1667 76, BIC: GENODEF1 GMV
 E-Mail: info@nepalmed.de, work.nepal@gmx.de
 Internet: www.nepalmed.de

Membership Application Form

consisting of page 1 application and 2 consent according to data protection, it is **mandatory to fill in both sides**

I would like to be a member of Nepalmed e.V.

Last Name:	First Name:
Date of birth:	Date of Submission:
Address:	postal code /city:
Phone:	
E-Mail:	

Hereby I acknowledge the constitution of Nepalmed e.V. The valid statute can be sent on request by e-mail and is available at www.nepalmed.de.
 By signing this mandate form, you authorise (A) Nepalmed e.V. to send instructions to your bank to debit your account and (B) your bank to debit your account in accordance with the instruction from Nepalmed e.V. As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which your account was debited. Your rights are explained in a statement that you can obtain from your bank.

Creditor Identifier: DE78ZZZ00000751673	
BIC:	<input type="text"/>
IBAN:	<input type="text"/>
annual contribution:.....€	Donation:.....€ annual / monthly
_____	_____
Name creditor	Name of Bank

Date, Signature account holder	

Membership fee annual (state 05 2017)	
student membership (prove student status annually)	15,00 Euro
Member	30,00 Euro
Family member	40,00 Euro
Institutions	100,00 Euro

Mandate reference will be the membership number. Annual fees will be charged at the 1. Monday of the month march. Recurring Fees (like monthly donations with the same value) will be charged at the 1st of each month.



Nepalmed e.V.
c/o Dr. Arne Drews
Straße des Friedens 27, D - 04668 Grimma
Tel + 49 3437 910329, Fax + 49 3437 910160
Volks- und Raiffeisenbank Muldentale eG
IBAN: DE67 8609 5484 5000 1667 76, BIC: GENODEF1 GMV
E-Mail: info@nepalmed.de, work.nepal@gmx.de
Internet: www.nepalmed.de

Consent according to data protection

The personal data stated in the application for membership, in particular name, address, telephone number, bank data, which are necessary and required solely for the purpose of carrying out the resulting membership, are collected on the basis of legal authorizations.

For any further use of personal data and the collection of additional information, the consent of the data subject is regularly required. You can give such consent **voluntarily** in the following section.

Consent to the use of data for further purposes

If you agree to the following purposes of use, please tick them accordingly. If you do not wish to give your consent, please leave these fields blank.

- I agree that Nepalmed e.V. sends me information about the work of Nepalmed e.V. by post.
- I agree that Nepalmed e.V. sends me information about the work of Nepalmed e.V. by e-mail/telephone/fax/SMS.
- I subscribe to the Nepalmed-Newsletter. The newsletter-subscriptions is free of charge and I can unsubscribe at any time.

place, date: _____

Signature of the person concerned: _____

Rights of the person concerned: Information, correction, deletion and blocking, right of objection

According to § 15 DSGVO you are entitled at any time to ask Nepalmed e.V. for comprehensive **information** about your personal data stored.

According to § 17 DSGVO you can request Nepalmed e.V. to **correct, delete and block** individual personal data at any time.

You can also make use of your **right of objection** at any time without stating reasons and change or completely revoke the declaration of consent with effect for the future. You can send the revocation to Nepalmed e.V. either by post, e-mail or fax. There are no other costs, than the postage costs or the transmission costs according to the existing basic tariffs.