

Membership Application

Name, firstname:	
Address:	
Zip code:	
City:	
Year of birth:	
Citizenship:	
·	
Phone number:	
I would like to receive the newsletter via email:	S NO
Email address:	
The annual membership fee is 15€ per person:	
paid by standing order (annually)	Bank accounts:
pole by starrolling order (drillionly)	CCPLLULL LU97 1111 1021 7837 0000
paid by bank transfer to one of our accounts	BGLLULL LU42 0030 1828 4534 0000
I would like to support the association Mäi Wëllen, Mäi Wee with an additional donation (tax deductible):	
with a one-time contribution of€ with an annual contribution of€	
Date:Signature:	
	Mäi Wöllop Mäi Woo

Please send the form to the following address:

1b, rue Thomas Edison

L-1445 Strassen