

Membership Application

Name, firstname:

Address:

Zip code:

City:

Year of birth:

Citizenship:

Phone number:

I would like to receive the newsletter via email: YES NO

Email address:

The annual membership fee is 25€ per person:

- paid by standing order (annually)
- paid by bank transfer to one of our accounts

Bank accounts:

CCPLLULL LU97 1111 1021 7837 0000
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:

Please send the form to the following address:

Mäi Wëllen, Mäi Wee
1b, rue Thomas Edison
L-1445 Strassen