

Application for membership in  
Dancers\* without Borders e.V.



To  
Tänzer\* ohne Grenzen e.V.  
Lichtenrader Straße 18  
D-12049 Berlin

Name: \_\_\_\_\_  
First Name: \_\_\_\_\_  
Profession\*: \_\_\_\_\_  
Date of birth: \_\_\_\_\_  
Stresst: \_\_\_\_\_  
Postcode: \_\_\_\_\_  
Placeof resident: \_\_\_\_\_  
Telefon\*: \_\_\_\_\_  
E-Mail: \_\_\_\_\_

(\* voluntary information)

I hereby apply for membership in the association "Tänzer ohne Grenzen e.V.:"  
with an annual membership fee of 20,00 €.

The membership is for one year and will be automatically renewed i fit is not  
revoked in the time before the end oft he year.

I will transfer the due annual membership fee tot he follwing account:

Account holder: Tänzer ohne Grenzen e.V.  
IBAN: DE29100500000190340789  
BIC: BELADEVXXX

Resason for payment: Membership fee 20XX

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Place, Date and signiture