

MEMBERSHIP DECLARATION (INDIVIDUAL)

Name of Institution/University

Personal Details

Name

Address

Telephone

Email

Subscription rate

In €

In words

I herewith acknowledge and accept the conditions for membership laid down
in the Articles of Association and in the Contribution Order.

(Place)

(Date)

(Signature)

For further information please contact Carmen Hofmann, Secretary General: c.hofmann@bankinghistory.de