

## **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.org](mailto:c.hofmann@bankinghistory.org)**