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## **MEMBERSHIP DECLARATION (Partnership Agreement)**

**Name of Institution**

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**Contact person**

Name

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Telephone

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**Subscription rate**

In €

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In words

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

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(Place)

(Date)

(Signature; company stamp)

**For further information please contact Carmen Hofmann, Secretary General: [c.hofmann@bankinghistory.org](mailto:c.hofmann@bankinghistory.org)**