

## declaration of membership

**Yes, I would like to belong to the Freundeskreis and will assist the Konrad-Adenauer-Stiftung continuously.**

The lowest contribution per year amounts: for individuals 60,-- EUR, for couples 80,-- EUR, for students / scholarship holders 40,-- EUR, or companies / institutions 500,-- EUR.

My annual subscription  \_\_\_\_\_  250,00 EUR  120,00 EUR  80,00 EUR  60,00 EUR  
single person/  
married couples

My annual subscription  \_\_\_\_\_  2.000,00 EUR  1.000,00 EUR  500,00 EUR  
company / institution

\_\_\_\_\_  
company / institution

I will pay my subscription      annual       biannual

\_\_\_\_\_  
academic title      name/contact person      first name

\_\_\_\_\_  
phone      facsimile

\_\_\_\_\_  
street      house number

\_\_\_\_\_  
e-mail      date of birth

\_\_\_\_\_  
postcode      place

\_\_\_\_\_  
date      signature

**Herewith I authorize the Freundeskreis der Konrad-Adenauer-Stiftung e.V. revocably to draw my contribution from \_\_\_\_\_ by debiting my bank account.**

The debiting takes place on my bank-account

\_\_\_\_\_  
credit institute

\_\_\_\_\_  
account number

\_\_\_\_\_  
bank code number

\_\_\_\_\_  
account holder

about my credit card  
(only for foreign sponsors)

American Express

Eurocard / Mastercard

Visa

\_\_\_\_\_  
card-No.

\_\_\_\_\_  
card owner

\_\_\_\_\_  
credit card valid to

\_\_\_\_\_  
date      signature