

Godparenthood

Hereby I certify that I would like to support a child by becoming a godparent.

surname, given name: _____

date of birth: _____

address: _____

phone number: _____

email: _____

place, date

signature

parent signature (if necessary)

Parent's name in block letters

Direct debit authorization

Hereby I authorize the non-profit organization „Baku yie - together as one e.V.“
to collect:

25 € per month*

75 € quarterly*

300 € yearly*

* please tick one box

by automatic debit transfer from the following account (until cancellation):

IBAN: _____

BIC: _____

Bank name: _____

Surname, given name of account holder: _____

Address: _____

place, date

signature of account holder

Details

Please send the signed form to the following address:

Baku yie - together as one e.V.

Weihertobelstr. 6

78591 Durchhausen

Tel.: +49 7464 / 3197

To read our statute please visit:

<http://www.baku-yie-together-as-one.de/contact/>