



Application for Membership

Sail Training Association Germany (S.T.A.G.)
S.T.A.G. Geschäftsstelle, Coloradostraße 7, 27580 Bremerhaven

Please complete this form in block capitals

Name: First name:
Date of birth (DD/MM/YY): | | Place of birth:
Nationality: Profession:
Address:
ZIP Code, City:
Phone: + Fax:
Mobil: E-Mail:
Owner/Operator of the ship (Type, Call Sign)

- | | |
|---|---------|
| <input type="checkbox"/> Students under the age of 30
(Please submit confirmation of student status) | 30,- € |
| <input type="checkbox"/> Adult | 60,- € |
| <input type="checkbox"/> Spouse of a S.T.A.G. member | 40,- € |
| <input type="checkbox"/> Ship owner with ship under S.T.A.G. flag | 90,- € |
| <input type="checkbox"/> Juristic person | 100,- € |

SEPA direct debit mandate

I authorize the *Sail Training Association Germany* (S.T.A.G.) to collect the annual membership fee by direct debit from my account.

Bank: Bank code: Account holder:

BIC: Account-No.: IBAN: ___ | ___ | ___ | ___ | ___ | ___

The S.T.A.G. is a registered non-profit organization. (Register: VR 785 AG Bremerhaven)

The authorization to collect by direct debit shall be revoked in written form.

According to the Articles of Association, the termination of the membership must be communicated in written form 3 months before the end of the year. I agree that my personal data will be stored for internal purposes.

Data protection is guaranteed.

....., the
(Place) (Date) Signature (legal guardian in case of minors)

Internal S.T.A.G.-notes: **(Please do not fill out)**

EDV: Best.: Mitglieds-Nr.: