

## **Application for membership**

I hereby apply for membership in the association "German-Canadian Air Force Museum e.V." as a regular member.

The membership fee is 20 euros per year.

### Master data (\* Required fields)

Surname *	Prename *	
Date of birth	Occupation	
Street address *		
Zip Code *	City *	
Phone *	Email <sup>1</sup>	

<sup>1</sup> By providing my email address, I consent to communication via email, being aware of potential security risks in email traffic. I can revoke this consent at any time for the future.



### **SEPA Direct Debit Mandate**

I authorize the German-Canadian Air Force Museum e. V. to collect payments from my account by direct debit. At the same time, I instruct my financial institution to honor the direct debits drawn by the German-Canadian Air Force Museum e. V. on my account.

Note: I can request a refund of the debited amount within eight weeks, starting from the debit date. The conditions agreed upon with my financial institution apply.

The membership fee is 20 euros per year.

Creditor Identification Number: **DE24DKL00001158396** Mandate Reference Number: **To be assigned by the association** 

Acc. Holder *	
Adress *	
Bank *	
BIC *	IBAN *
 Place / Date	Signature of Account Holder / Authorized Person



## **Data Protection Agreement**

**Note:** You can read the current privacy policy in detail at any time on our website: https://www.airforcemuseumsoellingen.de

#### Consent

I agree that the above data will be stored in an IT-supported member and contribution database for internal purposes of the association. Furthermore, I have received and read the privacy policy. Membership cannot be established without this consent. By signing, I acknowledge acceptance of the association's statutes in their current form.

Place / Date

Signature



### **Consent for Email Communication**

**Note:** Email communication can have security vulnerabilities. For instance, emails could be intercepted and viewed while in transit. Messages that are not additionally encrypted could potentially be read, copied, or altered.

#### Consent

I hereby declare to the German-Canadian Air Force Museum e.V. that I am aware of the aforementioned risks and explicitly consent to communication, especially the transmission of personal data such as photos, via email to the email address provided in the master data, without additional security measures.

#### **Right of Revocation**

I can revoke this statement in writing at any time for the future.

Place / Date

Signature



### **Consent for Use of Likeness**

Hereby I,

Name *	Prename *	
Date of birth *		
Adress *		

consent, into the creation, use, and publication of photos on behalf

O of myself	O of my minor child
Childs name * <sup>2</sup>	

through the association "German-Canadian Air Force Museum e.V."

This consent applies to the use of the photos for the following purposes:

- 1. Publication and distribution in the association's publications;
- 2. Publication on the internet on the association's websites;
- 3. Information to the press for reporting on [specific purposes].

The granting of rights is free of charge and includes the right to edit, provided that the editing is not distortive. My consent for individual images can be revoked at any time for the future. For group images, my consent is irrevocable unless a balancing of interests clearly favors me. In case of revocation, corresponding individual images may no longer be used for the aforementioned purposes and must be promptly deleted from the relevant publications.

Place / Date

Signature

<sup>2</sup> Only necessary if you are providing consent as a legal guardian for your child.