

Application of Membership



Freunde-Deutschland IG

Family Name	
First Vorname	
Street address	
Country / Post code / City	
Email	
Phone number(s)	

Please read carefully, fill and thereafter send

- Application of Membership
- SEPA form (Members of EU only!)
signed to:

Arabella-Freunde Deutschland IG
Uwe Pawelski
Kaltenbergstraße 7
D-76327 Pfinztal

The "Arabella-Freunde Deutschland IG" is an association of global owners and fans of the model "Arabella" of the Borgward group. Purpose of the IG is the revival and preservation of the still existing vehicles by supporting restoration, reproduction and spare parts procurement.

The website www.Arabella-Freunde.de is the official information platform. This is completed by our forum and in irregular intervals appearing newsletters.

Membership gives you the following benefits

- Discounts at spare parts reproductions
- Reduced registration fee at the annual meetings
- Assignment of an individual mail address [First name].[Family.Name]@Arabella-Freunde.de (forwarding address, on request with an additional charge private mailbox)

The membership fee for IG is € 35.00 per year, the contribution is at the contract and thereafter not later than 31.01. the following year due. Thank you for participating in the SEPA Direct Debit Scheme, the application form is in the appendix of this document. A termination of membership is possible at any time but must be carried out until 31.12. for the current year, otherwise the membership is automatically extended for another year.

I accept the conditions mentioned above.

Place, Date

Signature

SEPA-Lastschriftmandat



Payee	
Arabella-Freunde Deutschland IG	
Kaltenbergstraße 7	
D-76327 Pfinztal	
Creditor Identifier	DE60ZZZ00001905812
Mandate Reference	ARABELLA-FREUNDE_DEUTSCHLAND_IG

SEPA direct debit mandate

I/we authorize the

Arabella-Freunde Deutschland IG

to collect payments from my/our account via direct debit. At the same time, I/we will instruct my/our credit institution, that of

Arabella-Freunde Deutschland IG

redeem debits drawn on my/our account.

Note: I can/we can request reimbursement of the amount due within eight weeks of the debit date. The conditions agreed with my/our bank apply.

Account Holder (Name, First Name)	
Street, House Number	
Postcode / Town	
Credit Institution	
BIC	
IBAN	
Place and Date	
Signature(s)	

Attention! You have the option to SEPA direct debit mandate to have them collected your overdue annual dues only in the European payment area. If you have a bank account outside the European payment area, please transfer your membership fee via PayPal Finance@Arabella-Friends-Worldwide.com!