

APPLICATION FOR MEMBERSHIP

Name

I hereby apply for membership of the ADA - Austrian Directors' Association

Suname

Address: ZIP Code, City, Street		
Telephone	E-Mail	
I hereby recognise the statutes, objectives and of Directors. I hereby agree that my data may www.ada-directors.com. Reduced membersh extraordinary memberships and are therefore	be recorded electronically and a lips of students and young file	appear on the ADA website at
Membership fee	Annually	with direct debit mandate
Full Membership	144,00 EUR	100,00 EUR
Student/Junior membership	80,00 EUR	50,00 EUR

Title

Date of Birth

Please send the direct debit authorisation or transfer the membership fee to the following account: Erste Bank - IBAN: AT32 2011 1000 0203 5618 | BIC: GIBAATWWXXX

50% discount

Termination of membership

(z.B.: BVR, dok.at, Verband der Filmregisseure)

Please send us a confirmation

Double Membership

Termination is possible at any time and takes effect at the end of the following month. Written notice of membership termination must be given. A member may be expelled from the association by the Executive Board for gross violation of membership obligations. Further details can be found in our statutes.

ÖSTERREICHISCHER REGIEVERBAND

Löwelstraße 14

1010 Wien Austria

office@ada-directors.com www.adadirectors.com ZVR 276718748 Erste Bank AT322011100002035618 GIBAATWWXXX

Date, Signature





SEPA Direct Debit Mandate

Mandate reference (to be completed by the creditor):

Creditor Name ADA - Austrian Directors' Association Österreichischer Regieverband, Löwelstraße 14, 1010 Wien, Creditor ID: AT94ZZZ00000069345
By signing this mandate form, you authorise ADA - Austrian Directors' Association Österreichischer Regieverband to send instructions to your bank to debit your account and your bank to debit your account in accordance with the instructions from ADA - Austrian Directors' Association Österreichischer Regieverband.
As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which your account was debited.
Recurrent Direct Debit
Debtor
Name
Adress of the Debtor (Adress,
Postal Code, Country)
IBAN
10/114
BIC
BIC

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