

## REGISTRATION FORM

Your entered data remain confidential!

Name:  Last Name:   
Date of birth:  Place of birth:   
Adress:  Postal code:   
City:  Country:   
Phone:  E-Mail:

I hereby agree to the registration amount of 20 € and pay it within 14 days into the account of the Support et Partage.

### Bank details:

IBAN:DE77100500000190573210

BIC:BELADEBEXXX

BERLINER SPARKASSE

Account owner: Support et Partage

Date:

Signature:

Please send this registration form signed for your membership back to us by mail or email.

### By Mail:

Support et Partage e.v.  
Katzlerstraße 5  
D-10829 Berlin

### By E-Mail:

info@support-et-partage.org