



Badminton Club Mayen e. V.

1st Chairman

Ralf Haben

Mozart Weg 27

56727 Mayen

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Information about Badminton Club Mayen e.V.

2nd Chairman:

Marius Körber

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Youth

Christina Schweighöfer

Hinter dem Westbahnhof 1

56727 Mayen

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warden:

Sports warden:

Lioba Thielen

Mozart Weg 3a

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Managing

Andrea Gerhards

Director

Einsteinstr. 66

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Mail: kassenwart_bc-mayen@outlook.de

Material Warden:

Kai Mahnken

Mail: materialwart.bcmayen@gmail.com

If you have any questions or problems, please do not hesitate to contact us!

For training times, please see the notice on our material box or on our website.

| | | | | |
|-----------------------|---------------|-----------------|------------------------------|----------------|
| Contributions: | Adults | 6,00 € / month | Youths up to 18 years | 4,00 € / month |
| | Family | 10,00 € / month | Sponsorship fee | 3,00 € / month |

The one-off admission fee is € 5.00.

Please send any changes to membership and bank details to:

kassenwart_bc-mayen@outlook.de

Badminton Club Mayen e. V.

The processing of personal data is carried out in accordance with the EU Data Protection Regulation ("For details, see notice on the material box").

Declaration of accession

I hereby apply to join the Badminton-Club Mayen e.V.

First name: _____

Name: _____

Street, no., town: _____

Date of birth: _____

Phone/mobile, e-mail: _____

Gender: _____

I do not yet have a eligibility to play (not even in other associations).

I agree with the admission to the

E-mail distribution list

WhatsApp Group Friday (Seniors)

Senior's WhatsApp Group

WhatsApp Group Youth Training

WhatsApp Group Friday (Minis)

Please make sure to share a **mobile phone number** when signing up for one of the groups above.

Direct debit mandate

I hereby authorise Badminton-Club Mayen e.V. to collect the club fee and the special fees of the aforementioned member(s) from my account listed below. I will inform Badminton-Club Mayen e. V. immediately of any changes to this data. I will be charged for any costs incurred due to failure to do so. As of 2014, the collection will be carried out using the SEPA direct debit procedure.

Contributions are paid by direct debit every six months.

Our creditor identification number in the SEPA Direct Debit Scheme is
This was issued by the Deutsche Bundesbank on 7 March 2013.

DE11ZZZ0000023509

BIC: _____ IBAN: _____

Admission to the: _____ Account holder: _____

Contribution: Youth *: Adults: Family: Sponsorship fee:

* This also includes pupils, students and apprentices.

The admission fee of 5,00 € will be debited directly by BC Mayen e.V..

A deregistration must be declared in writing by the third working day of the previous month for the end of the calendar half-year.

I hereby confirm that I am aware of and accept the admission and deregistration conditions from the Badminton- Club Mayen e.V..

Town, date:

Signature:

Badminton Club Mayen e. V.

Declaration of consent for the publication of photos

As a sports club, we want to present our activities on our homepage and in other media, such as daily newspapers, Facebook or brochures.

For this purpose, we would like to use photos from the life of the association, on which you and/or your child(ren) may also be individually recognizable. For legal reasons ("right to one's own image") this is only possible with your consent.

We therefore ask you to sign the consent form required for this:

I/we hereby give permission to BC Mayen e.V. to take and publish club-related photos of me/our child/children. These are:

1.

2.

3.

4.

This declaration of consent applies to photo publications in connection with events, newspaper articles, reports, social media and publications on the website of BC Mayen e.V. (www.bc-mayen.de).

We are informed that BC Mayen e.V. is solely responsible for the content of its own website. There is and will be no liability claim against BC Mayen e.V. for the type and form of use of its website, e.g. for downloading images and their subsequent use by third parties.

The consent is voluntary. You will not suffer any disadvantages from refusing or withdrawing your consent.

Town, date:

Signature/ Name of legal guardian(s):