REQUEST OF MEMBERSHIP

REQUEST OF M	IEMBERSHIP	Cakal
full name		Soaked in oca
		Joca
birth date	country of birth	~
street		
postcode & city		
postcode & city		
country	mobile phone	
e-mail		
protection laws and regulation	s, (eg. for Newsletters, invita	in Soca e.V. exclusively in accordance with the applicable data tion for yearly General Meetings etc.). A revocation of the use of given below. Once your application is successful, you will be
		e start of the year on January 1st. all new members must immediately pay the full annual
details given below payment is confirmed	before the 1st of the fo	embership fee to the PayPal or bank account ollowing month. Membership begins as soon as via e-mail your welcome details. cations that violate the association's statutes.
		Soaked in Soca e.V.
		Deutsche Skatbank
paypal.m	e/soakedinsoca	IBAN: DE38830654080004281136 BIC: GENODEF1SLR
date & city	signature	
complete and send to: membership@soakedinsoca Soaked in Soca e.V. Kornblumenweg 3 50858 Köln Germany	a.com or	Only fully and correctly completed applications will be accepted. All fields are mandatory.

Admission on: Memebership number: