



AKWA MMIRI e.V. ▪ c.o. Erzb. Marienschule Opladen ▪ An St. Remigius 21, 51379 Leverkusen

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## DECLARATION OF ACCESSION WITH THE ADOPTION OF A SPONSORSHIP

Hereby I/We declare our accession to the association **Akwa Mmiri e.V.** (e.V. = Registered Association)

\_\_\_\_\_  
Name, First Name

\_\_\_\_\_  
Street and house number

\_\_\_\_\_  
Postcode and place of residence

\_\_\_\_\_  
E-mail address

\_\_\_\_\_  
Date of birth

\_\_\_\_\_  
Date of entry

**I agree with the storage and processing of the Application form and for the purposes of the application and reception of e-mail from the association according to the Federal Data Protection Act**

**Instead of the membership fee, I would like to take over a sponsorship and authorize the association to include the costs of the sponsorship from the following account using the Direct debit mandate.**

Please tick the type of sponsorship you would like to take over:

I/We would like from this \_\_\_\_\_ (month/year) to support the training of \_\_\_\_ Child (ren)/Young people as the Godparent, in

- Kindergarten (for 3 years), Monthly min. 7,-€
- Elementary School (for 6 years), Monthly min. 9,-€
- State Secondary school/gymnasium, one-time entry fee: 100,-€
  - (for 6 years), Monthly min. 13,-€
  - in a boarding school, Monthly Min. 28,-€
- Private Secondary school, one-time admission fee: 550,-€
  - (for 6 years), Monthly min. 50,-€
- University/higher institution (for \_\_\_\_ years), Monthly min. 50,-€/200€ per semester

\_\_\_\_\_  
Place, date

\_\_\_\_\_  
Signature



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## DIRECT DEBIT MANDATE FOR RECURRING PAYMENTS

Name and address of the payee:

Akwa Mmiri e.v., C.O. Erzb. Marien School Opladen, an St. Remigius 21, 51379 Leverkusen, Germany.  
Creditor identification Number: 20AKWAMMIRI12

I authorize the payee Akwa Mmiri e.V. to collect payments from my/our account via direct debit. At the same time I instruct my/our credit institution to redeem my account/direct debits drawn by the payee Akwa Mmiri e.V.

Note: I / We can refund the refund within 8 weeks, starting with the debit date charge amount. The conditions agreed with my / our bank apply.

Method of payment: \_\_\_\_\_ € once a Year.

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Name, First name

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Street and house number

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Postcode and place of residence

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Payer IBAN (max 35 digits)

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BIC (8 or 11 digits)

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Place, date

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Signature Member

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Signature account holders

Processing note from Board: \_\_\_\_\_



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## DATA PROTECTION

In view of the new EU General Data Protection Regulation (GDPR), this came into force on 25. May 2018, we would like to ask you for your consent to the storage of your information entered in the registration form and the receipt of information sent by e-mail. The given data are used exclusively for administrative purposes with regard to members and the email address serves the individual contact or the information about current projects and planned actions of the association. Upon termination of the active membership, all electronically stored data will be irretrievably deleted. A transfer of the data to third parties does not take place. If you do not wish to receive such information, do not agree with the use of the -mail address or the storage of the data given in the application form, please send a short message to [Info@ddlproject-germany.com](mailto:Info@ddlproject-germany.com). Of course, you always have the opportunity to inform us if you want to be deleted from the mailing list or are no longer in agreement with the storage of your data.

I have read the privacy policy and accepted it.

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Place, date

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Signature