



Receptive applicant for ZfdP
Zuchtverband für deutsche Pferde e.V.
Am Allerufer, 27283 Verden

I apply for membership of the Zuchtverband für deutsche Pferde e.V. as an ordinary/ extraordinary member.

name: _____ first name: _____

date of birth: _____

street + house number: _____

postal code + place of residence: _____

country: _____

telefon-nr: _____ mobil-nr.: _____

mail: _____

homepage: _____

On the application for the board decides in accordance with § A.4 of the statute. The order is accepted if the applicant approaching the premium statement with the admission fee and the annual fee).

(By signing I accept the articles of association, breeding programs and tariff regulations of the ZfdP and willing in the storage and processing of my personal data acc. Art. 6, 7 DSGVO by ZfdP. I have been referred to the privacy policy at www.zfdp.de.

Please send the completed form to

place of residence + date

signature

Please send the completed form to:

Zuchtverband für deutsche Pferde e.V., Am Allerufer 28, 27283 Verden/ Aller

SEPA direct debit mandate (administrative costs will be payable if the SEPA mandate is not issued)

Creditor identification number: DE35ZZZ00000631973 Mandate reference: _____

I authorize the association Zuchtverband für deutsche Pferde e.V. to collect payments from my account via direct debit. At the same time I instruct the bank to redeem the direct debits drawn on my account by the association Zuchtverband für deutsche Pferde e.V.. The authorization can be revoked anytime.

Note: I can request a refund of the amount debited within eight weeks of the date of the debit. The conditions agreed with my bank apply.. *Note: Invoices for breeding certificates/ equine passports are excluded from direct debit and must be paid by bank transfer.*

different account holder _____

Bank (name) _____

BIC: _____

IBAN: D E _ _ | _ _ _ _ | _ _ _ _ | _ _ _ _ | _ _ _ _ | _ _

place of residence + date

signature