



Protect the Maldives e.V.

Protect the Maldives e.V.
c/o Jörn Bernard
Dorotheenstraße 65 b
22301 Hamburg
Germany

Please send your application to the address
on the left, or fax to +49 40 271 505 333
or send to info@protectthemaldives.com .

Membership Application

I have read the statutes and accept them.

I apply for the membership in the organization „Protect the Maldives e.V.“ as ...

Full member*

- Student 10,- Euro p.a.
 Single Person 20,- Euro p.a.
 Family 30,- Euro p.a.
 higher fee ___ Euro p.a.

Sustaining member**

- Single person 30,- Euro p.a.
 Company 50,- Euro p.a.
 higher fee ___ Euro p.a.

My personal data is as follows:

Company _____

First Name(s) _____ Last Name _____

Street/No. _____ Zip _____ City _____

Country _____ E-Mail _____

I transfer the first annual fee within two weeks. I will transfer future annual fees in January of each year to the below mentioned bank account. If I don't pay, my membership ends automatically.

I confirm that my personal data may be locally stored on electronic devices. This data will solely be used within this organization and will not be given to other parties. The laws for data storage and privacy will be guaranteed by the organization.

Date _____ Signature _____

* Full members have voting power in the general meeting and want to actively support the organization.

** Sustaining members do not have voting power in the general meeting and want to support the organization without active participation.