



FC Schalke 04

APPLICATION FORM

(Please fill out in block capitals)

Please send the signed and completed form in an envelope with the appropriate stamp to: FC Gelsenkirchen-Schalke 04 e. V., Department of Member Services, Postfach 20 08 61, 45843 Gelsenkirchen.

First name	Membership number*
Surname	Date of birth
Street, house number	<input type="checkbox"/> male <input type="checkbox"/> female
Postcode	City
Country	Telephone number
	Mobile phone number
	Email address

Paying with credit card

I wish to pay my membership fee and Kreisel subscription with credit card
For details please contact the Department of Member Services in advance (membership@schalke04.de)

applies for admission as a passive member in the football department at FC Gelsenkirchen-Schalke 04 e. V.

I do not wish to receive the member magazine Schalker Kreisel.

Authorisation of direct debit payment

I authorise direct debit payments SEPA Debit Agreement for membership fee and Kreisel subscription.

Customer identification number: DE60ZZZ00000309289

Address of club: FC Gelsenkirchen-Schalke 04 e. V. · Ernst-Kuzorra-Weg 1 · 45891 Gelsenkirchen

SEPA Direct Debit Agreement

I authorise FC Gelsenkirchen-Schalke 04 e. V. to take debit payments from my bank account. I will instruct my bank to allow FC Gelsenkirchen-Schalke 04 e. V. to redeem said payments from my account.

N.B.: I can claim a refund of the debited amount within eight weeks of the first payment. This is valid according to my bank's agreed terms and conditions.

In addition to the initial membership fee, there will be a one-time application fee of €5 charged to my account.

As far as the payee is obliged to a give notice of payment, the payer shall receive notification no later than one working day prior to the account being charged.

Name of account holder	Name of bank
Street, house number	BIC
Postleitzahl	Ort
Country	IBAN
Email address	<input checked="" type="checkbox"/> Signature of account holder

I was informed of this service by:

Surname, first name	Membership number
City, date	<input checked="" type="checkbox"/> Signature of member or guardian
<input checked="" type="checkbox"/> Signature of member or guardian	<input checked="" type="checkbox"/> Signature of member or guardian
Gelsenkirchen, date*	FC Schalke04 e. V.*

*to be filled out by the club

Declaration of Data Protection Law consent
I confirm that I understand that my personal details (name, address, date of birth and E-Mail address) will be used to contact me by post and E-Mail, and also for FC Schalke 04 e. V. promotional purposes and subsidiary companies of FC Schalke 04 e. V., sponsors and partners of FC Schalke 04 e. V. may also use my details. I am aware that my consent can be cancelled at any time.

FC Gelsenkirchen-Schalke 04 e. V.
Mitgliederservice
Postfach 20 08 61
45843 Gelsenkirchen
Deutschland