Membership application form Eindhovense Roeivereniging Beatrix

Junior

Personal details for applicant younger than 18

First name _____

Name preposition _____ (for example: van, Von, etc.)

Family name _____

Initials _____ (First letter of all given names. For example: A.B.C.)

E-mail _____

Phone _____

Street _____

Number _____

Postcode _____

City _____

Country Netherlands

Date of birth _____ (for example: 2010-12-31)

Height _____ cm

Gender Female ◯ Male ◯

Can swim well ☐ (Membership is not possible when the applicant cannot swim)

Personal details of parent or guardian

Membership requests for individuals below the age of 18 (junior members) must be signed by a parent or guardian.

By signing this form, the guardian or parent declares that he/she gives permission to ERV Beatrix to allow the youth member to row independently and without supervision in the club's boats, after the youth member has passed the necessary exams and has received permission from the coach.

Personal details of parent or guardian who signs this form:

Name _____

E-mail _____

Telephone _____

Optional: personal details of 2nd parent or guardian:

Name _____

E-mail _____

Telephone _____

Space for comments and additional information

Authorisation form for direct debit and signature

The applicant will comply with the articles of association ("Statuten") and regulations of ERV Beatrix.

I hereby authorise ERV Beatrix to collect any fees related to my membership in accordance with article 8 of the Statuten, including membership contributions and any other amounts I owe to ERV Beatrix (including, but not limited to, the KNRB and NOC/NSF contribution, any racing fees, deposit for a key, club clothing, etc.) from my bank account.

After ERV Beatrix' approval of the membership application, I will receive a written statement specifying the amounts due for the current membership year. The contribution for the following membership years is established annually at the General Assembly. I shall be informed in writing of all amounts owed by me and the date of direct debit, prior to collection of any fees.

The direct debit number of ERV Beatrix is NL31 ZZZ 4023 8007 0000.

In case I disagree with any fees collected, I can request the withdrawal of this direct debit and ask for a repayment of incurred fees within 56 days at my bank.

You can cancel your membership by emailing ledenadministratie@ervbeatrix.nl. If you cancel after December 1st, you will be charged the full membership fee for the following year.

My IBAN-bank account is in the name of: _____

IBAN number: _____

Signature on the application form:

Signed for receipt on behalf of ERV Beatrix: