



# Förderverein John-Cage-Organ-Kunst-Projekt e.V.

Förderverein J.-Cage-Organ-Kunst-Projekt e.V. • Domplatz 48 • 38820 Halberstadt • Tel.: 03941 692950 • Fax: 03941 692929 • [www.aslsp.org](http://www.aslsp.org) • [cage-ev@aslsp.org](mailto:cage-ev@aslsp.org)

## Membership Form

As a full-fledged member please check one:

- more cage*             Single: minimum 30€             Couple: minimum 50€
- young cage*             Single: 20€             Couple: minimum 35€
- very much cage*             Single: 369€            /  Couple: 639€ /  Institution upon contact

I/We hereby authorise the treasurer of Fördervereins John-Cage-Organ-Kunst-Projekt e.V., to withdraw the amount of \_\_\_\_\_ annually from:

Account holder: \_\_\_\_\_

IBAN.: \_\_\_\_\_

BIC: \_\_\_\_\_

Financial institution: \_\_\_\_\_

A receipt for tax purposes will be issued.

This withdrawal authorisation is valid until \_\_\_\_\_.

Address:

\_\_\_\_\_  
Institution/Company:

\_\_\_\_\_  
First Name:

\_\_\_\_\_  
Last Name:

\_\_\_\_\_  
Street:

\_\_\_\_\_  
Telephone/Fax:

\_\_\_\_\_  
City,

\_\_\_\_\_  
Postal code

\_\_\_\_\_  
Country

\_\_\_\_\_  
Occupation

\_\_\_\_\_  
Email address (required)

\_\_\_\_\_  
City

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature