INTERNATIONAL KUNSTVEREIN LUXEMBOURG

MEMBERSHIP APPLICATION FOR

FAMILY MEMBERSHIP

We would like to become	ome membe	ers of the INTERNATIONAL KUNSTVEREIN LUXEMBOURG a.s.	s.b.l.
1. Surname, Name			
2. Surname, Name			
Street/Number			
Postcode/City/Country			
Phones			_
E-mails			
1. Birth date (mm/dd/yy)			
2. Birth date (mm/dd/yy)			
contact with me about i.e. the membership can data at any time. My defor further information. The annual fee for a family. The membership fee is valid year. If the membership is not the current year is to be particular.	t current ev ard. The IKL lata is store on please re membersh d for the cur ot cancelled id in full. If	stored on the local server of the IKL to enable the IKL adminant rents of the association via newsletter and internal information of the association via newsletter and internal information of the association via newsletter and internal information of the association of the association of the IKL guarantees to add our data protection regulations (GDPR). In it is 120 EUR. It is 1	tion for members via post, e, and correct my personal delete my data hereafter. before the end of the nt reminder automatically.
	Bank Holder IBAN BIC	Banque de Luxembourg INTERNATIONAL KUNSTVEREIN LUXEMBOURG a.s.b.l. LU86 0080 3436 6880 2001 BLUXLULL	
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Please send in the completed and signed form to: INTERNATIONAL KUNSTVEREIN LUXEMBOURG a.s.b.l., 21 A, av. Gaston Diderich, L-1420 Luxembourg or as scan via email to: info@kunstverein.lu

Signatures and date