International Bilingual Montessori School (ibms) e.V.
Senckenberganlage 20-22, D-60325 Frankfurt
www.ibms-frankfurt.com

Application for membership

I hereby apply for admission to the sponsor association (Trägerverein) of the **International Bilingual Montessori School (ibms) e.V.**

Name, First Name _____

Address _____

Job title / Employer _____

Phone private _____ Phone mobile _____

Email _____

Do you or did you have children at ibms? Yes ☐ No ☐

Are your or were you employed at ibms? Yes ☐ No ☐

The annual fee is 50.00 Euro. If you join or leave during the year, the full amount is due.

_____ _____
Place, Date Signature

SEPA- direct debit mandate
(Recurrent Payments)

CreditorInternational Bilingual Montessori School (ibms) e.V.

Creditor-Identifier DE52ZZZ00001156534

I authorise **International Bilingual Montessori School (ibms) e.V.** to collect payments from my account by direct debit. At the same time I instruct my bank to honour the direct debits made by **International Bilingual Montessori School (ibms) e.V.** to my account.

Note: I may request reimbursement of the amount debited within eight weeks from the date of debiting. The terms and conditions agreed with my bank apply.

Name of debtor: _____

Name of the bank: _____

IBAN: ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

BIC: ☐☐☐☐☐☐☐☐☐☐☐

_____ _____
Place, Date Signature