

Declaration of support for Filmhaus Frankfurt e.V.

To Whom it May Concern,

We would hereby like to donate to the association Filmhaus Frankfurt e.V. for purposes of conducting the goals set forth in its Articles of Association (<https://www.filmhaus-frankfurt.de/en/filmhaus-frankfurt/statutes/>)

Please choose from the following:

- yearly – yes – no
- one-time – yes – no

the following amount:

- 500 EUR – yes – no
- 1000 EUR – yes – no
- 5000 EUR – yes – no
- _____ (other amount)

** mandatory fields:*

Name of
company:*

Contact
partner:

Position of
contact
partner:

Street:*

Postal code:*

City:*

Telephone:

E-mail:*

Please check the following options:

We would like to receive the Filmhaus Frankfurt Newsletter by e-mail – yes – no

We would like to receive GRIP – Journal of the Filmhaus Frankfurt by post – yes – no

- 1 copy – yes – no
- _____ copies

Address / Contact information Filmhaus:
Filmhaus Frankfurt
Fahrgasse 89
60311 Frankfurt
Tel.: 069 / 13 37 99 94
E-Mail: info@filmhaus-frankfurt.de

Account:
Frankfurter Sparkasse
IBAN: DE81500502010000285900
SWIFT-BIC: HELADEF1822

We would like to receive GRIP – Journal of the Filmhaus Frankfurt online – yes –
no

This signed declaration (and, if applicable, the signed permission for granting of the SEPA direct debit mandate) can be delivered to the association by post or in digital form (e.g. as scans in PDF format).

I grant permission for storing, processing and use of the following personal information by the association in the course of electronic data processing: company name, address, e-mail address, and (if provided) contact partner, position of contact partner and telephone number.

Place, date
Company seal

Signature /

Permission to issue a SEPA direct debit mandate

Association's Creditor Identification Nummer: DE44ZZZ00001326234

Mandate reference: _____
(to be filled out and confirmed by Filmhaus Frankfurt)

I authorize Filmhaus Frankfurt e.V., Frankfurt am Main, to withdraw all agreed donations to the Filmhaus Frankfurt e.V. from this account by direct debit.

At the same time, I instruct the credit institution to allow direct debits from this account by Filmhaus Frankfurt e.V.

Note: You have a period of eight weeks, starting from the debiting date, to demand the return of the amount debited. The terms and conditions you have agreed with the credit institute apply.

Credit institute: _____ BIC: _____

IBAN: _____

Account holder: _____

I grant permission for storing, processing and use of the following personal information by the association in the course of electronic data processing: banking information

Place, date
/Company stamp

Signature