Membership Application I hereby declare my membership of the German Society for Cell Biology e.V. (DGZ) with immediate effect. The DGZ annual membership fee of EUR 80.00 for full members, EUR 60.00 for dual members DGZ & GBM (Note: Membership in GBM must be applied for at the GBM office and the GBM membership fee paid separately) and EUR 30.00 for students will be charged at the beginning of each year.	SEPA-Lastschriftmandat/ SEPA Direct Debit Mandate I authorize the DGZ to debit my membership fee from my account. At the same time, I instruct my bank to debit my account with the DGZ's demand. Note: Within 8 weeks, I can request a refund of the amount debited.
Title, First Name, Last Name	Account Holder (First Name and Last Name)
Address (business <u>or</u> private address)	Street and Number
Address	Postal Code and City
Address	Bank Institute
Street and Number	IBAN - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - - -
Postal Code and City	BICI
E-mail	
Status and DGZ Annual Membership Fee: Full Member (EUR 80,00) Dual Member DGZ & GBM* (EUR 60,00) Student Member: (EUR 30,00) *Please contact the GBM for GBM membership information. City, Date and Signature	
Change/Updating Membership Data If your address or parts of your address have changed or if you have become a member of the GBM (dual member) or have changed from student to full member/dual member and your membership status has changed, please inform the DGZ office.	Change/Updating Bank Account Details If your bank details for collecting the membership fee have changed, please inform the DGZ office.
Title, First Name, Last Name	Account Holder (First Name und Last Name)
Address (business or private address)	Street and Number
Address	Postal Code and City
Address	Bank Institute
Street and Number	_{ТВАЙ} — — I — — — — I — — — — I — — — — I —
Postal Code and City	BICI
E-mail	

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City, Date and Signature