

## Membership Form

Please, add my membership with the **SHS Foundation Förderverein e.V.**

as of: \_\_\_\_\_

Please, print in capitals!

Name	_____	Given Name	_____
Firma	_____	Position	_____
Address	_____	City	_____
ZIP	_____	State	_____
Home Phone #	_____	Fax	_____
Cell Phone #	_____		
E-mail address	_____		
Date of Birth	_____		

### Membership categories:

individual \$ 15 per month

corporate \$ 50 per month

donation

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

## Payment Information

Membership dues (from above): \$ \_\_\_\_\_

Donation: \$ \_\_\_\_\_

**Total payment** \$ \_\_\_\_\_

**Please, make your check payable to:**

**SHS Foundation Foederverein e.V., D-66115 Saarbruecken, Germany**

\_\_\_\_\_

Date

\_\_\_\_\_

Signature

SHS Foundation Foederverein e.V. is a non-profit corporation. All contributions are tax-deductible to the extend allowed by law.