BZL.
Bundesverband zivile Legalwaffen

Bundesverband zivile Legalwaffen e.V.
Mitgliederservice
Chausseestraße 37
D-10115 Berlin

APPLICATION FOR MEMBERSHIP

Company name _____

Street _____ Zip/City _____

Country _____ E-Mail _____

Herewith we apply for membership in the BZL as

☐ Full Member (according to § 3 of the statute) ☐ Sustaining Member (according to § 3 of the statute)

_____ _____

Place, Date Signature, Company Stamp

MODE OF PAYMENT

The membership fee of 600 € * per year (Full Member)
respectively 150 € * per year (Sustaining Member) will be paid

☐ by bank wire after receipt of the annual invoice

☐ by direct debiting system according to the following direct debit mandate

Herewith I revocably legitimate the BZL to collect our annual membership fee from the following account

Account Holder (if different from member)

IBAN: BIC:

_____ _____

Place, Date Signature

* The shown amount represents the minimum annual membership fee.

☐ I accept the privacy policy under bzl.net/datenschutzerklaerung-mitgliedschaft-verein/

☐ I subscribe for the BZL-Newsletter