

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

APPLICATION FOR LIFETIME MEMBERSHIP

I hereby apply for Lifetime Membership of the BZL.

Surname, first name _____ Date of Birth _____
Street, No. _____ Phone _____
Zip-Code, City _____ E-Mail _____

admission to the BZL in accordance with § 3 of the valid statutes.

I am ☐ Hunter ☐ Sports Shooter ☐ Gun Collector
☐ Ammo-Collector ☐ Knife Collector

☐ I am member of the following hunting or sports shooting federations/organizations

☐ I am already a regular BZL-member and want to upgrade to "Lifetime-Membership". ☐ I am not a member yet and want to become "Lifetime Member" from day one.

Place, date

Signature/stamp

METHOD OF PAYMENT

☐ I authorise BZL to debit my account with the one-off membership fee of € 350.

☐ You will receive my transfer of € 350 to the BZL account in the next few days
IBAN: DE35 6805 0101 0020 0087 69 | SWIFT-BIC: FRSPDE66XXX

Account holder (if different): _____

IBAN: _____

BIC: _____

Place, date

Signature

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

☐ I would like to subscribe to the BZL newsletter.