Registration form

Lightning Leiden  
secretaris@lightningleiden.nl  
Postbus 2068, 2301 CB Leiden  
www.lightningleiden.nl

**Please fill out the data below in CAPITALS and return to the administration.**

Initials : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Given name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Family name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date of birth : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place of birth : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Nationality : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postal code : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Former member of

(if applicable) : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**The yearly contribution can be paid in two ways:** (check off your choice)

Ο Direct debit once a year until given notice in writing of membership.  
Payments are made in the final week of January of the current season.

Ο Direct debit once a month over twelve (12) equal payments until given notice in writing of membership. Payments are made afterwards on the 28th of each month.   
ATTENTION: membership always lasts until the 31st of August!!

**Include the following to this registration form or e-mail to** [**ledenadministratie@lightningleiden.nl**](mailto:ledenadministratie@lightningleiden.nl)**:**

* 1 recent passport photo (preferably digital)
* Filled out and signed payment authorisation\*\*

**Conditions of membership:**

* To register a valid ID must be presented with one of the boardmembers or membership management
* Membership is valid at least until and with August of the current season.
* **Membership is renewed automatically for a year, unless membership is cancelled in writing at Ledenadministratie: postbus 2068, 2301 CC Leiden or** [**Ledenadministratie@lightningleiden.nl**](mailto:Ledenadministratie@lightningleiden.nl) **at the latest of Jule 15th.**
* Membership is subject to conditions, which are registered in the articles of association and the household register of the club.
* Upon registration it is mandatory to aid in four (4) promotional events on behalf Lightning Leiden. These four events are: the Taptoe, Leiden Marathon, Peurbakkentocht and one of choice.
* Upon registration it is mandatory to fulfil voluntary work on behalf of Lightning Leiden. More information on this can be found in the “vrijwilligershandboek” on our website [www.lightningleiden.nl](http://www.lightningleiden.nl) under “Media => Downloads”.
* Payment of membership-fee can only be made by direct debit, always be done on the 28st of the month (afterwards) or in the last week of January (before).
* Medical relevant information might be stored in case of an injury during practise or a game by one of the club’s medical staff. This information is strictly personal and will only be used to improve the medical care.

The undersigned has read the mentioned conditions and knows the code of conduct and declares that the above mentioned is filled out truthfully.

Date : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Place : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature applier

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

If the new member is under aged (younger than 18), the data below mus be filled out by the parents, care takers or legal guardian.

Family name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Initials : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Form of representative : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postal code : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

City : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Phone number : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature representative in case of under age

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Dear members, parent(s) or legal guardian,

By filling out this authorisation form completely at the bottom of this letter, to sign it and to turn it in, Apek Administraties V.o.f. will be authorised on behalf of the management of Lightning Leiden to withdraw the payments of (league) fee and transportation fees form your bank account. The category in which the member will participate must be checked off. If one of the membership fees change you will be informed immediately before the new payment will be made. Therefor you will always be up to date of the amount which is withdrawn from your bank account. Furthermore you can reverse payment up until 58 days after payment using a “terugboekingskaart” or online banking. When membership ends, the authorisation will be revoked and the payments will be stopped. Of course the membership will be cancelled, if this authorisation will be subdued by you. On the form you can check off the term of the payments. ATTENTION: Lightning Leiden will always be authorised to withdraw any current debt, even after the membership has been cancelled.

On behalf of the management, the treasurer.

**Authorisation form \*\***

The undersigned,

Family name and given name : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Address : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Postal code en city : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-mail : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Gives hereby, until cancelled, permission to the treasurer of Lightning Leiden to withdraw from his or her bank account in the chosen terms.

IBAN : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

BIC :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

And agrees with the rules of authorisation, like stated.

Current fees on January 1st 2016, check off all that apply.

Year month

Ο Player senior flag football € 189.00 € 16,75

Ο Player tackle football youth tackle € 282,00 € 24,50

Ο Player tackle football cadets € 234,00 € 20,50

Ο Player flag football cubs € 177,00 € 15,75

Ο Player flag football peewees € 150,00 € 13,50

Ο Non playing member € 90,00 € 8,50

Ο Friend of Lightning € 66,00 € 5,50

Fee will be withdrawn O yearly O monthly.

Date:\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ Place:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_