



Schwul-Lesbischer Sportverein „Der Bogenschütze“ Dresden e.V.  
Postfach 100 109, 01071 Dresden

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Internet: [www.bogenschuetzen-dresden.de](http://www.bogenschuetzen-dresden.de)

IBAN: DE78 850 503 00 312 004 29 85  
BIC: OSDDDE81XXX (Ostsächsische Sparkasse Dresden)

## Change Form for Existing Members

First Name

Last Name

**My new address is:** *(complete if applicable)*

Street / House Number

Zip Code (PLZ)

City

**New Bank Account:** *(complete if applicable)*

Account Owner *(if different from the above-listed member)*

IBAN

BIC

**New Authorization for a direct debit (a „SEPA-Lastschrift“) or Withdrawal of Authorization of an existing direct debit authorization („SEPA-Lastschriftmandats“):**

I hereby provide revocable authorization to the *Schwul-Lesbischen Sportverein „Der Bogenschütze“ Dresden e.V.* to directly debit the annual membership dues from the following bank account via a direct debit (a “SEPA-Lastschrift”). At the same time, I hereby request that my banking institution process the debit request of the *Schwul-Lesbischen Sportverein „Der Bogenschütze“ Dresden e.V.* directly from my account. I may request a refund of the debit within 8 weeks, beginning from the date of the debit. The applicable conditions agreed between me and my banking institution apply.  
Direct Debit Authorization / Creditor ID (“SEPA Lastschrift Mandat / Gläubiger-ID”): DE25ZZZ00000200503

I **withdraw, with immediate effect**, my existing direct debit authorization („SEPA-Lastschritteinzug“) that had been provided to the *Schwul-Lesbischen Sportverein „Der Bogenschütze“ Dresden e.V.*

**The status of my membership has changed:** *(complete if applicable)*

*Qualifying Reason for a Reduced-Fee Membership*

**Reduced-Fee Membership**

**Regular Membership**

Note: a request to cancel your membership must be written and sent to the Board at least four weeks prior to the end of the quarter in which it is cancelled. E.g., completing and delivering this form to the Board by December 1 effectively cancels your membership for the following year.

I **cancel my membership as of:**

March 31  June 30.  Sept. 30  Dec. 31

of the year

Place / Date

Signature of Bank Account Owner

Signature of Member