

Bundesverband Vermögensanlagen  
im Zweitmarkt Lebensversicherungen e.V.  
– Vorstand –  
Ridlerstraße 33  
80339 München

## Application for Membership

### 1. Your data

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Company: .....

Contact: .....

Street: .....

Postal code / place: .....

Phone: .....

Fax: .....

E-Mail: .....

I hereby apply for membership in the „Bundesverband Vermögensanlagen im Zweitmarkt  
Lebensversicherungen e.V.“

Full member (EUR 5,000 net / year)

Sustaining member (EUR 4,000 net / year)

I acknowledge the Statutes and accept the amount of membership fee

Direct debit

Invoice

Account No.: .....

Place/date: .....

Bank: .....

Signature: .....

Bank routing code: .....

