

*Please print clearly in block letters.*

Full Name\* \_\_\_\_\_

Address Line 1\* \_\_\_\_\_ Address Line 2 \_\_\_\_\_

City\* \_\_\_\_\_ Postal Code\* \_\_\_\_\_ Country\*: \_\_\_\_\_

Email Address\* \_\_\_\_\_ Telephone\* \_\_\_\_\_

Website/Blog \_\_\_\_\_

*\*required information*

*I am:*     an employee     a freelancer     other language professional: \_\_\_\_\_

*I work in/with (check all that apply):*

- Private language school     Volkshochschule     State school  
 State university     Private school/university     Private students  
 Private Business English agency     In-company direct contracts     Other: \_\_\_\_\_

*Please tell us a few words about your background as an English language professional:*

---

---

*Please tell us how you found out about ELTABB:*

- ELTABB Website     ELTABB Facebook group     ELTABB Meetup group  
 Word of mouth     Twitter     Other: \_\_\_\_\_

*Please tell us why you decided to join ELTABB. What benefits do you expect to receive as a member?*

---

*By submitting the above information and signing below, I agree that, upon receipt of membership fee:*

- *ELTABB will subscribe my email address to their monthly e-newsletter and other mailings (I can unsubscribe at any time),*
- *I understand that my contact details will not be made available to all members, but will only be used by the current ELTABB Board members for administrative purposes,*
- *I agree to notify the Membership Coordinator <membership@eltabb.com> of any changes to my contact details or bank information and agree that ELTABB is not responsible for fees incurred due to incorrect/outdated bank info.*

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Place / Date*

*DATA PROTECTION: ELTABB treats your personal data confidentially and in line with applicable data protection laws. We will not disclose your data to third parties and use it only for administering your membership in accordance with Article 6 General Data Protection Regulation (GDPR) and our association's Statutes. We will erase data when they are no longer needed.*

*Your rights: You may access your data and obtain information about them at any time. You also have a right to rectification, erasure, restriction of processing and data portability, as well as a right to object to the processing. The supervisory authority with whom you may lodge a complaint when you believe the processing of your personal data infringes the GDPR is: Der Berliner Beauftragte für Datenschutz und Informationsfreiheit, Friedrichstr. 219, 10969 Berlin / mailbox@datenschutz-berlin.de. The data controller is: The English Language Teachers' Association Berlin-Brandenburg e.V, c/o Sarah Brown, ELTABB Chair, Schulstr. 3, 12247 Berlin. Please get in touch with us should you have a data protection issue at: thechair@eltabb.com.*

**Please print, sign, scan and email this form to: Membership Coordinator ([membership@eltabb.com](mailto:membership@eltabb.com)) or send it by post to: ELTABB c/o Brigid Thurgood, Motzstr. 59, 10777 Berlin. Please allow 5-7 business days for processing.**

For office use only:

|   |                               |                               |                               |
|---|-------------------------------|-------------------------------|-------------------------------|
| <input type="checkbox"/> Direct Deposit   | <input type="checkbox"/> 2018 | <input type="checkbox"/> 2023 | <input type="checkbox"/> 2028 |
| <input type="checkbox"/> Standing Order   | <input type="checkbox"/> 2019 | <input type="checkbox"/> 2024 | <input type="checkbox"/> 2029 |
| <input type="checkbox"/> Corporate: _____ | <input type="checkbox"/> 2020 | <input type="checkbox"/> 2025 | <input type="checkbox"/> 2030 |
|   | <input type="checkbox"/> 2021 | <input type="checkbox"/> 2026 | <input type="checkbox"/> 2031 |
|   | <input type="checkbox"/> 2022 | <input type="checkbox"/> 2027 | <input type="checkbox"/> 2032 |

## Direct Debit Authorization Form / Lastschrifterteilung

version 2019-06-06

Please print clearly in block letters.

|                                  |  |
|----------------------------------|--|
| Name on account/<br>Kontoinhaber | <input type="text"/>   |
| IBAN                             | <input type="text" value="D"/> <input type="text" value="E"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> |
| BIC / SWIFT                      | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>                     |
| Name of bank/<br>Kreditinstitut  | <input type="text"/>   |

Fee for first year of membership (check one):

- €40 when joining in Jan/Feb/Mar/Apr/May/Jun
- €30 when joining in Jul/Aug/Sep
- €20 when joining in Oct/Nov/Dec

Date of application: \_\_\_\_\_

Please note: The annual membership fee is €40. Your account will be automatically direct debited for the next year's fee unless you cancel your membership before Dec 1st.

I/we hereby empower ELTABB to debit the bank account above with the annual membership fee by direct debit for the duration of my/our membership. Cancellation of membership must be received by ELTABB in writing not later than four weeks before the end of the financial year (by December 1st). Should this deadline not be respected, the cancellation shall not take effect until 31 December of the following year. In this case, the membership fee for that year is due. If the stated bank account holds insufficient funds to cover the direct debit, the institution which holds the account is under no obligation to cover the transaction. In this eventuality, the member is liable and will be invoiced for any charges incurred to ELTABB. Please notify the Treasurer if you change banks. Fees charged to ELTABB as a result of processing the direct debit to a cancelled bank account will be charged to the member.

*Hiermit ermächtige(n) ich/wir Sie widerruflich, den Jahresbeitrag bei Fälligkeit zu Lasten meines/unseres oben angegebenen Kontos durch Lastschrift für die Dauer meiner Mitgliedschaft einzuziehen. Die Kündigung der Mitgliedschaft muss schriftlich vier Wochen (zum 1. Dezember) vor Jahresende erfolgen. Sollte diese Frist nicht eingehalten werden, wird die Kündigung erst zum 31. Dezember des Folgejahres wirksam. In diesem Fall wird auch der Mitgliedsbeitrag für das betreffende Jahr fällig. Wenn das angegebene Konto die erforderliche Deckung nicht aufweist, besteht seitens des kontoführenden Geldinstituts keine Verpflichtung zur Einlösung. In diesem Fall wird die für ELTABB entstehende Bearbeitungsgebühr dem Mitglied in Rechnung gestellt.*

\_\_\_\_\_  
Signature / Unterschrift

\_\_\_\_\_  
Place, Date / Ort, Datum

*DATA PROTECTION: ELTABB treats your personal data confidentially and in line with applicable data protection laws. We will not disclose your data to third parties and use it only for administering your membership in accordance with Article 6 General Data Protection Regulation (GDPR) and our association's Statutes. We will erase data when they are no longer needed.*

*Your rights: You may access your data and obtain information about them at any time. You also have a right to rectification, erasure, restriction of processing and data portability, as well as a right to object to the processing. The supervisory authority with whom you may lodge a complaint when you believe the processing of your personal data infringes the GDPR is: Der Berliner Beauftragte für Datenschutz und Informationsfreiheit, Friedrichstr. 219, 10969 Berlin / mailbox@datenschutz-berlin.de. The data controller is: The English Language Teachers' Association Berlin-Brandenburg e.V, c/o Sarah Brown, ELTABB Chair, Schulstr. 3, 12247 Berlin. Please get in touch with us should you have a data protection issue at: thechair@eltabb.com.*

**Please print, sign, scan and email this form to: Membership Coordinator ([membership@eltabb.com](mailto:membership@eltabb.com)) or send it by post to: ELTABB c/o Brigid Thurgood, Motzstr. 59, 10777 Berlin. Please allow 5-7 business days for processing.**