



### Application for Membership

I hereby apply for the membership in the Deutsch-Baltische Genealogische Gesellschaft e.V.

Family Name:..... First Name(s):.....

Date of Birth:..... Place of Birth / Country:.....

Maiden Name:..... Occupation:.....

Address:

Street:..... House Number:..... Telephone No:.....

Postal Code:..... Ort:..... Country:.....

Fax-No.:..... e-Mail:.....

Further data regarding the family:

Family Association:.....

President of the Family Association:.....

Address:.....

Contact person in genealogical matters and address:.....

#### Direct Debit Authorization:

I (We) hereby authorize the Deutsch-Baltische Genealogische Gesellschaft e.V. Darmstadt to debit outstanding amounts to my (our) account. I can revoke this authorization in writing at any time.

Account-Keeping Bank:..... Place:.....

Account No.:..... Bank Code:..... If the name of the member is not identical with the name of the account holder, please state the name of the member:

.....

Place / Date..... Signature:.....

The **membership fee** is Euro 40.00.

Banking relations and note for transfers from other countries: see reverse.

According to the tax office of Darmstadt, tax no. 007250 75550, the DBGG is entitled to write **receipts for donations**. In addition to the membership fee, I am willing to make a donation of Euro ..... per year. In case of a direct debit authorization, I want the donation to be collected together with the membership fee at the respective maturity. A receipt for the donation is requested yes / no.

Important note regarding the **storage of data**:

In signing this application, I acknowledge that the collected data are recorded and stored for internal purposes of the DBGG. I agree to the passing on of such data to other members in accordance with the rules of the DBGG. In case of doubt, I request a check-back before the data are passed on.

**Signature** for the application for membership:

(In case of societies or organizations: Please also together with a stamp and the President's signature.)

Place / Date..... Signature:.....

**Please also note the reverse of this page**

Processing remarks (only) for DBGG:

Date receipt:      Date entry:      Data collection:      Direct Debit      Member No.      Filing

..... Committee      .....      .....      .....      .....

1. Please answer the following genealogical questions:

The following family names are part of my field of research and I may be able to provide information thereon:

.....  
.....  
.....

a) The geographic focus of my research is on:

- Courland                       Livonia                       Estonia  
 Riga                               Reval (Tallinn)            Others

remarks, if necessary

.....  
.....  
.....

b) I can provide the DBGG with the following documents for further research / for making copies / for an exhibition / for other purposes ..... on loan / as a donation:

.....  
.....  
..... (use a separate sheet, if necessary)

c) I am willing to actively support the work of the DBGG in the following areas (e.g. the drawing up of card files, the evaluation of sources etc.):

.....

2. My special wishes:

a)  I am looking for the ancestors of:.....

b)  I would like to contact the researchers of the following fields of research:

.....  
.....

c)  Other:.....

.....  
.....

**Bank relations of the DBGG:**

Transfers from Germany: Sparkasse Langen-Seligenstadt Konto 24 100 273 (BLZ 506 521 24)  
Transfers from other countries: Int. Bank Account Number DE 53 5065 2124 0024 100273  
SWIFT-BIC: HELADEF1SLS

(As of February 2016)