		O.111		
Filled	in by	Silicon	Saxonv e.	ν.

MNo.:

Membership from: Fee:





Silicon Saxony e. V. Board Manfred-von-Ardenne-Ring 20 F 01099 Dresden BOARD:

Prof. Dr. Frank Schönefeld, Dirk Röhrborn, Heike Wilson, Raik Brettschneider, René Reichardt

Registration court Dresden VR 3903 TAX Number: 202/142/07533 VAT Registered No.: DE222662079

Regular Member: Sponsor:

A separate remuneration package is	available for sponsoring members. We will gladly	y supply you with the relevant info	rmation upon request.		
<u>Company:</u>		Founded:			
2. address line:		Employees:			
Street:		Head Office:	region	worldwide	
ZIP/City:		State:			
Phone:		Fax:			
E-mail:		Web:			
Managing Director:		Phone:			
E-mail:		Fax:			
Contact Person (for the asso	ociation):				
Function:		Phone:			
E-mail:		Fax:			
Business fields: (Please	e mark the main market segments where yo	ou are active)			
Semiconductor	(Renewable) Energies	Aerospace	Equipment	t	
Biotechnology	Medicine / Pharmaceutical	Communication	Electronics	5	
Hardware	Automotive	Software	Environme	ent	
Date:	S	Signature:			
we consent to all data being proce	e acknowledge the charter and the regulation essed and stored by means of EDP exclusive the Federal Data Protection Act. The other me	ly in the sense of the associatio	n Silicon Saxony e. V	/. in the	

Payment:

The Payment is to be carried out in accordance with the regulation of contributions. Payment via:

Invoice

Debit authorization (I agree with details of my account information and my signature that the cost of my membership can be directly debited from my account until I revoke my consent. Please fill and sign the following SEPA Direct Debit Mandate)



SEPA Direct Debit Mandate

for SEPA Core Direct Debit Scheme

Creditor name and address

Silicon Saxony e. V. Manfred-von-Ardenne-Ring 20 F 01099 Dresden

Recurrent Payments

CI/Creditor Identifier **DE20ZZZ00001061080**

Mandate reference corresponds to membership number

SEPA Core Direct Debit Mandate

We authorise the creditor

Silicon Saxony e. V.

to send instructions to our bank to debit our account in accordance with the instructions from the creditor

Silicon Saxony e. V.

As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within 8 weeks starting from the date on which your account was debited.

Debtor name (Company/Name, Street name and number, Postal code and City)					
Bank					
BIC	IBAN				
Location, Date	Signature(s) of the debtor				
Ecoulist, Bute	olgridian o(o) of the debion				