**Registration form Ultimate Frisbee club Gronical Dizziness**

**Personal information**

|  |  |
| --- | --- |
| Last name |  |
| First name |  |
| Gender (of play) |  |
| Date of birth |  |
| Nationality |  |

**Address**

|  |  |
| --- | --- |
| Address line |  |
| Postal code |  |
| City |  |

**Contact information**

|  |  |
| --- | --- |
| Phone number |  |
| E-mail address |  |
| IBAN / BIC (only required if using the pre-authorized debit option) |  |

**Costs**

|  |  |
| --- | --- |
| Youth member  | ⬜ Yes ⬜ No |
| Income status (not applicable for youth) | ⬜ Low (student / unemployed) ⬜ High (working) |

Subscribing with Gronical Dizziness automatically makes you a member of the Dutch Frisbee Bond (NFB). This information will be registered in the Allunited system of the Ultimate Frisbee Clubs in the Netherlands. Your date of birth and postal code will be registered in KISS (Knowledge Information System Sport of the NOC\*NSF).

⬜ I will transfer the fee to Gronical Dizziness (after having received an invoice) ⬜ I pay by pre-authorized debit (only Dutch IBAN-numbers)

You authorize us (Groningse Frisbee vereniging) to withdraw funds from the bank account stated below for your Gronical Dizziness fees and/or costs of activities. Prior to deduction you will receive an invoice stating the amount and approximate deduction date. If you don’t agree with the withdraw, you can reclaim the amount within 30 days from your bank.

⬜ I give permission to use visual material with myself on it on social media for promotional purposes

Date: Signature: