## **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)
(NFB). This information will be Netherlands. Your date of birth System Sport of the NOC*NSF.  I will transfer the fee to Go I pay by pre-authorized do You authorize us (Groningse Fibelow for your Gronical Dizzine invoice stating the amount and can reclaim the amount within 3	ronical Dizziness (after having received an invoice) ebit (only Dutch IBAN-numbers) risbee vereniging) to withdraw funds from the bank account stated ess fees and/or costs of activities. Prior to deduction you will receive an approximate deduction date. If you don't agree with the withdraw, you
Date:	Signature: