



## Application Form DIVERSITY IN ARCHITECTURE e.V.

### ANNUAL MEMBERSHIP FEE

SINGLE MEMBER 80 EUR    COUPLES 100 EUR    COMPANIES & INSTITUTIONS 500 EUR

TITLES

FIRST NAME

LAST NAME

DATE OF BIRTH

INSTITUTION

FUNCTION

ADDRESS (Business or Private)

ZIP / CITY / COUNTRY

PHONE

EMAIL

DATE, SIGNATURE

### PREFERRED METHOD OF PAYMENT

- I will pay my membership fees after receipt of an invoice  
 Herewith I authorize DIVERSITY IN ARCHITECTURE e.V.,  
Maybachufer 24, 12047 Berlin, to send instructions to my bank to debit my account  
for the annual membership fees

NAME OF DEBTOR

BANK

IBAN

BIC

PLACE, DATE, SIGNATURE

**Please send this application form to Diversity in Architecture e.V.,  
Maybachufer 24, D-12047 Berlin, mail@diversityinarchitecture.de**

Membership is valid for the whole calendar year regardless of the time of joining and is extended automatically. Membership can be terminated by a notice period of three months to the end of the year.