

Membership application



I would like to apply for full membership of 'VAA – Chemistry Managers', recommended by

Recruiter	Membership number (optional)
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The membership fee is 22.25 euros per month.

For further information please check out the VAA FEE SCHEDULE at vaa.de/beitragsordnung.

The **annual membership fee** is due at the beginning of each calendar year, either by direct debit or by invoice, in cases where a direct debit mandate has not been granted. If the membership is cancelled before the end of the calendar, no proportionate refund will be given for the remaining months. **New members** who are at the beginning of their employment receive a discount on the membership fee for the first two years of full membership. This discount is available to all applicants, who apply for membership within the first five years of their professional activity after finishing their graduate or postgraduate degrees. Please send the completed and signed application for membership by e-mail to verwaltung@vaa.de.

First name		
Surname		
Title	Date of birth	Gender
		<input type="checkbox"/> m <input type="checkbox"/> f <input type="checkbox"/> d
Private address: Street, Number		
Postal code	City	
Country		
Private E-Mail		
Private phone number/Cell phone	Date first prof. activity	

Professional group (please select appropriate group)

- | | |
|---|--|
| <input type="checkbox"/> Chemistry | <input type="checkbox"/> Technical qualification |
| <input type="checkbox"/> Medicine | <input type="checkbox"/> Mathematics |
| <input type="checkbox"/> Biology | <input type="checkbox"/> Economics |
| <input type="checkbox"/> Biochemistry | <input type="checkbox"/> Law |
| <input type="checkbox"/> Pharmacy | <input type="checkbox"/> Business administration |
| <input type="checkbox"/> Physics | <input type="checkbox"/> Agriculture |
| <input type="checkbox"/> Engineering | <input type="checkbox"/> Other profession |
| <input type="checkbox"/> Commercial qualification | |

Highest degree (please select appropriate group)

- | | |
|---|---|
| <input type="checkbox"/> Diploma university | <input type="checkbox"/> State exam university |
| <input type="checkbox"/> Diploma techn. college | <input type="checkbox"/> Bachelor university |
| <input type="checkbox"/> Master university | <input type="checkbox"/> Bachelor (BA) techn. college |
| <input type="checkbox"/> Master techn. college | <input type="checkbox"/> other degree |

How did you become aware about the VAA?

- Recommendation
 Internet
 Social Media
 Event/Meeting
 Outdoor advertising
 Advertising kit

I am member in the DECHEMA

I am member of the GDCh

I am member of the FTA

Company/Employer		
VAA-company group	Application date	
Company address: Street, Number, Building		
Postal code	City	
Country		
Member of the executive board/ managing director	yes	no
I would like to receive the VAA magazine as follows:	postal	digital

Information on data protection

I hereby irrevocably agree to the collection, processing and use of the above mentioned data, including personal data, for internal use. Notably internal use includes administrative purposes such as congratulations or honours. The VAA handles all data strictly confidentially and according to the principle of data avoidance and minimisation. This agreement includes the processing of data exclusively for organisational purposes, inter alia, by honorary members holding organisational posts and functions.

Declaration of membership

With my membership I accept the VAA statutes (available at vaa.de/satzung) in their current version. The subscription to the „VAA Magazin“ is included in the membership.

City, Date	Signature
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Kontoinhaber: VAA Verband angestellter Akademiker

Postbank IBAN DE 28 3701 0050 0000 5625 06 | BIC PBNKDEFF | Steuer-Nr. 215/5893/0043 | Finanzamt Köln-Mitte

Verband angestellter Akademiker und leitender Angestellter der chemischen Industrie e. V. | Eingetragen im Vereinsregister Köln VR 4504

Mitglied im Deutschen Führungskräfteverband ULA und im Europäischen Führungskräfteverband Chemie FECCIA

SEPA-Basis-Mandat/SEPA Direct Debit Mandate für SEPA-BASIS-Lastschriftverfahren/for SEPA Core Direct Debit Scheme

Name & Anschrift des Zahlungsempfängers (Gläubiger)/Creditor's Name & adress

VAA – Fach- und Führungskräfte Chemie Gregorius-Maurus-Str. 11 – 17 50670 Köln	oder/or per Fax: 0221-160016 per E-Mail: verwaltung@vaa.de
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Gläubiger-Identifikationsnummer/Creditor identifier DE33ZZZ00000042443	Mandatsreferenz/Mandate reference <hr/> (falls bekannt)/(if known)
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Mit diesem SEPA-Lastschriftmandat ermächtige ich ab sofort den VAA – Führungskräfte Chemie e. V. meinen Mitgliedsbeitrag von meinem nachfolgend genannten Konto mittels Lastschrift einzuziehen. Der erste Einzug erfolgt für den laufenden Jahresbeitrag innerhalb der nächsten 4 Wochen.

Das Mandat gilt anschließend **wiederkehrend einmal jährlich zum 31. Januar des jeweiligen Jahres** und kann jederzeit von mir widerrufen werden. Zugleich weise ich mein Kreditinstitut an, die vom VAA e. V. auf mein Konto eingezogenen Lastschriften einzulösen.

Hinweis: Ich kann innerhalb von acht Wochen, beginnend mit dem Belastungsdatum, die Erstattung des belasteten Betrags verlangen. Es gelten dabei die mit meinem Kreditinstitut vereinbarten Bedingungen.

With this SEPA direct debit mandate, I authorise the VAA - Führungskräfte Chemie e. V. to debit my membership fee from my account stated below with immediate effect. The first direct debit will be made for the current annual membership fee within the next 4 weeks.

*The mandate will be **recurring once a year on 31 January of the respective year** and can be revoked by me at any time. At the same time, I instruct my credit institution to honour the direct debits collected by the VAA e. V. on my account.*

Note: I may request a refund of the debited amount within eight weeks, beginning with the debit date. The terms and conditions agreed with my bank shall apply.

Name des Zahlungsempfängers/Creditor's name VAA Verband angestellter Akademiker

Kontoinhaber/Zahlungspflichtiger (Vorname, Name, Straße, Hausnummer, PLZ, Ort)/Name of debtor, Street name and number, Postal code and city, Country
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Kreditinstitut/Financial institution

IBAN/Account number IBAN	BIC/Swift BIC
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Hinweis: Die Angabe des BIC kann entfallen, wenn die IBAN mit DE beginnt.
Note: The BIC may be omitted if the IBAN begins with DE.

Ort, Datum/Location, date	Unterschrift (Zahlungspflichtiger)/Signature
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