



# APPLICATION FORM

**(Please fill out in block capitals)**

Please send the signed and completed form in an envelope with the appropriate stamp to: FC Gelsenkirchen-Schalke 04 e. V., Department of Member Services, Postfach 20 08 6 1, 45843 Gelsenkirchen.

Yes, I want to become a member of the Knappenkids Club!  
(Knappenkids Club membership includes automatic FC Gelsenkirchen-Schalke 04 e. V. membership)

First name	
Surname	
Street, house number	
Postcode	City
Country	
Email address	

Membership number*	
Date of birth	
<input type="checkbox"/> male	<input type="checkbox"/> female
Telephone number	
Mobile phone number	
<input type="checkbox"/> Yes, I am already a FC Schalke 04-Member	Membership number

**Paying with credit card**

I wish to pay my membership fee and Kreisel subscription with credit card  
For details please contact the Department of Member Services in advance (membership@schalke04.de)

applies for admission as a passive member in the football department at FC Gelsenkirchen-Schalke 04 e. V.

I do not wish to receive the member magazine Schalker Kreisel.

**Authorisation of direct debit payment**

I authorise direct debit payments SEPA Debit Agreement for membership fee and Kreisel subscription.

Customer identification number: DE60ZZZ00000309289

Address of club: FC Gelsenkirchen-Schalke 04 e. V. · Ernst-Kuzorra-Weg 1 · 45891 Gelsenkirchen

**SEPA Direct Debit Agreement**

I authorise FC Gelsenkirchen-Schalke 04 e. V. to take debit payments from my bank account. I will instruct my bank to allow FC Gelsenkirchen-Schalke 04 e. V. to redeem said payments from my account.

N.B.: I can claim a refund of the debited amount within eight weeks of the first payment. This is valid according to my bank's agreed terms and conditions.

In addition to the initial membership fee of €30, there will be a one-time application fee of €10 (€5 for S04-Members) charged to my account.

As far as the payee is obliged to a give notice of payment, the payer shall receive notification no later than one working day prior to the account being charged.

Name of account holder	
Street, house number	
Postcode	City
Country	
Email address	

Name of bank	
BIC _____ _____ _____ _____ _____ _____	
IBAN _____ _____ _____ _____ _____ _____ _____ _____ _____ _____	
<input checked="" type="checkbox"/> Signature of account holder	

**I was informed of this service by:**

Surname, first name	
City, date	
<input checked="" type="checkbox"/> Signature of member or guardian	
Gelsenkirchen, date*	

Membership number	
<b>Declaration of Data Protection Law consent</b> I confirm that I understand that my personal details (name, address, date of birth and E-Mail address) will be used to contact me by post and E-Mail, and also for FC Schalke 04 e. V. promotional purposes and subsidiary companies of FC Schalke 04 e. V., sponsors and partners of FC Schalke 04 e. V. may also use my details. I am aware that my consent can be cancelled at any time.	
<input checked="" type="checkbox"/> Signature of member or guardian	
FC Schalke04 e. V.*	

\*to be filled out by the club

FC Gelsenkirchen-Schalke 04 e. V.  
Mitgliederservice  
Postfach 20 08 61  
45843 Gelsenkirchen  
Deutschland