

PARTNER TARIFF

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1. Partner

Mr. Mrs. Fee category
 B C

Title

First Name

Last Name

Further address details (Institute, company etc.)

Street

Postal code City

Date of birth Membership No.

2. Partner

Mr. Mrs. Fee category
 P

Title

First Name

Last Name

Further address details (Institute, company etc.)

Street

Postal code City

Date of birth Membership No.

_____ Date

_____ Signature 1. Partner

_____ Signature 2. Partner