
YES! I WANT TO BECOME A MEMBER

PRIVATE INDIVIDUALS | May become involved with and support Aspen by applying for membership in the Verein der Freunde des Aspen Instituts e.V. (Friends of the Aspen Institute).

FIRST NAME:

LAST NAME:

ADDRESS:

POSTAL CODE:

CITY:

TELEPHONE NUMBER:

EMAIL:

DIRECT DEBIT - AUTHORIZATION | I hereby authorize the Verein der Freunde des Aspen Instituts e.V., Inselstrasse 10, 14129 Berlin, to deduct the **annual membership of Euro 675** from my bank account.

ACCOUNT HOLDER:

BANK:

ACCOUNT NO:

BANK CODE:

DATE:

SIGNATURE:
