

BROTHERHOOD ST. CHRISTOPH



REGISTRATION FORM FOR MEMBERSHIP IN THE BROTHERHOOD ST. CHRISTOPH

| Title/Surname | |
|--|---|
| First name | Profession |
| Date of birth | Nationality |
| Postal Code and State | City |
| Street and house number | |
| Phone (incl. country code) | |
| PRIVATE PERSONAL email address: | |
| ABSOLUTELY MANDATORY, please write legib | oly! |
| administration of my person as a member, for membership list of all Brothers and Sisters, for | ay use my personal data, given above, for registration and r the payment of annual donations, for management of the or the generation of invitations to events and for other kinds tives. I can revoke this agreement with the Brotherhood St. |
| Date of application | Signature |
| Sponsored/recommended by Brother/Siste | er. |
| First year donation per person | : € 200,- |
| Costs included in the first year donation are: The initiation ceremony First year donation of € 50 | Included in the initial annual donation are: The Arlberg book "Pass, Hospiz & Brotherhood" – in colour print in German and English, Book about the old Rules and Statutes of the "worthy" Brotherhood, key ring and silk scarf (for couples), Badges, Activity Report, stickers for the car, short history of the Brotherhood, Artistically designed |

ADMINISTRATIVE OFFICE: BRUDERSCHAFT ST. CHRISTOPH, 6580 ST. CHRISTOPH AM ARLBERG/ÖSTERREICH

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certificate - to be sent after the year of admission