



Application for Membership

Account details

Young Initiative on Foreign Affairs
and International Relations e.V.
BIC (SWIFT-Code): GENODEM1GLS
IBAN: DE88 4306 0967 1351 9346 00

Email: info@ifair.eu
www.ifair.eu

Name, First Name*	
Date of Birth*	
Citizenship*	
Street, house number*	
Postal / ZIP code, City and Country*	
E-Mail*	
Phone number with country code	

*Mandatory fields

Profession/School/University (Department, number of semesters)	
Possible funding programm/scholarship (e.g.. Studienstiftung, KAS, FES)	
How would I like to get involved with IFAIR? (e.g., publishing articles, participating in an impact group, attending events)	
Notes	

Type of membership

- I would like a basic membership and pay an annual fee of €24.
- I would like to support IFAIR as a supporting member and will pay €80 per year.
- I would like to be exempt from the membership fee. Reason (e.g., recipient of federal student aid or welfare):

Declaration of Accession

I hereby declare my membership in the Young Initiative on Foreign Affairs and International Relations e.V. as an active member and accept the association's bylaws and membership fee regulations. By submitting this application, I consent to the storage and processing of my data for internal association purposes. The personal data collected during the admission process will be stored and processed electronically exclusively for the purpose of internal data and text processing. IFAIR will never disclose my data to third parties without my prior consent. The Executive Board will decide on the application in accordance with § 5 (2) of the IFAIR bylaws.

City, Date	Signature

SEPA Direct Debit Mandate

I hereby authorize the Young Initiative on Foreign Affairs and International Relations e.V. to collect the annual membership fee I am required to pay via direct debit from my account (collection begins in the month following the submission of the membership application or on February 1 of the respective calendar year). At the same time, I instruct my bank to honor the direct debits drawn on my account by IFAIR e.V. Note: I may request a refund of the debited amount within eight weeks, starting from the date of the debit. The terms and conditions agreed upon with my bank apply.

IFAIR Creditor Identification Number: DE11ZZZ00000709326

Mandate Reference: Date of membership application (DDMMYY format) followed by initials of first and last name

Account holder	
Street, house number	
Postal / ZIP code, City, Country	
IBAN	
BIC (SWIFT Code)	
Name of the bank institute	

City, date	Signature

If you would like to pay your membership fee from outside the SEPA area, please indicate this in your email.

Please send the completed application as a PDF to info@ifair.eu.