



Membership Form

I want to become a member of the association Citizens of Europe e.V. By doing so, I demonstrate my desire to strengthen and support the association.

As a member, I have the right to actively participate in general assemblies. I can elect and candidate for the board and all other functions within the association.

Surname, Name

Date of Birth

Email Address

Permanent Address:

Street, No.

Postal Code, City

Country

I will pay my membership fee of 12/24/36 Euro annually by bank transfer to the Bank account of Citizens of Europe.

Place, Date

Signature