

# **Registration Form Arnhemse Volleybalvereniging Aetos**

Hand in by post : Ledenadministratie Aetos/ Babs van den Akker, Kapellenberglaan 37,

6891 AB, Rozendaal.

Hand in by email: ledenadministratie@aetos.nl

If under the age of 18, this form must be completed and signed by the parents/guardians.

Last Name:	
First Name:	
Initials:	
Gender: Male/ Female (Please delete what does not apply)	
Date of Birth:	
Address (street/ house number)	
Postal CodeCity	
Email	
Telephone Number:	
Please register me as:	Team/ Group
□ Player of a Nevobo-competition called:	
☐ Member (not player) of a Nevobo-competition called:	
□ Player of a Midweek Competition team, called:	
□ Recreant (not playing in any competition);	
□ Player of a Para Volleybal team	
<ul> <li>Member (not player) of Para Volleybal team</li> </ul>	
□ Member of CMV Youth Team;	
□ Member A- B- C-Youth Team	



## Jouw privacy, ons beleid



# Aetos and the European privacy legislation (GDPR)

For the proper functioning of our association, we would like to inform you about the association, sports activities	S
and offers and the like. We also want to place game schedules, match results and sometimes photos and video	)S
of you on our website and social media. We therefore ask for your permission for the following (cross out what	
does not apply):	
1. I give permission for the recording and processing of my personal data in the membership administration	
Yes / No	
2. I give permission for taking photos and videos of me during [events, activities, competitions] of our association	n
and the use of these on our website and social media.	
Yes / No	
3. I give permission to post my first and last name on our website and social media	
Yes / No	
4. I agree with the privacy policy of the association as described on our website (www.aetos.nl)	
Yes / No	
Important Note: Your approval can be revoked at any time. Send an email to:ledenadministratie@aetos.nl	
Olympatows (allows a allow bosse)	
Signature (please sign here)	
Name:	
Place: Date:	



#### **Contribution and Membership**

The contribution is determined annually by the GMM. The contribution overview can be found on our website (www.aetos.nl). The association year runs from July 1 to July 1 the following year. Your membership runs parallel to the association year. The membership is automatically extended if the secretariat has not received notice of termination before 1 juli.

### **Student Discount and Gelrepas**

Aetos gives a 25% discount on the basic contribution (without surcharges) to players who are in possession of an Arnhem student card. In addition, students are exempt from registration fees. We also accept the Gelrepas, a municipal scheme that allows people on benefits to exercise more cheaply. However, should this municipal arrangement unexpectedly deteriorate or even expire, our association cannot of course be held liable for the consequences of that municipal decision. For more information, see: www.gelrepas.nl

If you are in possession of an Arnhem student card or Gelrepas, please enclose a copy.



## **Cancellation of Membership**

CMV members up to and including 12 years of age may cancel twice a year.

Cancellation before December 31. Membership will then end on January 1.

Cancellation before June 30. Membership will then end on 1 July.

Members from the age of 13 may cancel once a year.

Cancellation before June 30. Membership will then end on 1 July.

Cancellation of membership can only be done in writing (by letter post or by e-mail) to the membership

administration.

Memberschip administration Aetos Kapellenberglaan 37 6891 AB Rozendaal

Email: ledenadministratie@aetos.nl

In case of late cancellation, the full membership fee is due.



# Registration and Authorization to collect Contribution

The undersigned registers as a member of the Arnhem Voll	eyball Association Aetos and authorizes A.V. Aetos to
debit the contribution and any curebarges from his or her as	equent. A one off registration for of 6.5 will be levied
debit the contribution and any surcharges from his or her ac	count. A one-on registration lee of € 5 will be levied
(except: holders of a student card or Gelrepas).	
(Chespa Holders of a clause Holders of Consepac).	
Name of the account holder:	
Name of the account holder.	
A aldress s	
Address:	
Postal Code / City:	
Bank Account Number:	
<u>Signature</u>	
Name:	
Place:	Date
Please sign here::	
The same of the sa	
(If under 18: signature of parent/guardian)	
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