## APPLICATION FORM



Checked and approved by the Board: Spiele-Autoren-Zunft e.V. (SAZ) Friedhofstr. 1 □Yes No Date \_\_\_ 68623 Lampertheim DB ML ∏ BA ☐ GL Germany I herewith apply for membership in the Game Designers Association (SAZ) Please fill this form on the PC or use clear print letters and print it. All entries marked with an asterisk\* are required! All other indications are voluntary. Do not forget your signature. First name\* ☐ male ☐ female ☐ diverse Last name\* Street + No.\* Zip code\* City\* Country\* **Phone** Email\* Website Date of birth\* DD.MM.YYYY **Profession** Application for a regular membership: I am game author and have already published games or developed as a prototype. Please name games and enclose as proof for prototypes a copy of the game rules and possibly a photo. Prototype proofs will be deleted or returned as soon as they become known. Game title\* **Prototype Publisher** Year Application for a supporting membership: I am not a game author, but I will support the SAZ. **BYLAWS & DATA PROTECTION** Mandatory box\*: I have read and accept the bylaws of the association and the data protection guideline. In particular, I agree to the storage of the above-mentioned personal data, my bank data and the sending of all member information material via an externally stored mailing list. For the networking of authors among each other, the email address can be forwarded to SAZ regional representatives. In addition, no data will be passed on to third parties without the prior consent of the member. All detailed rights regarding information, disclosure and deletion are contained in the data protection guideline.

I will pay the regular annual membership fee of EUR 100.00   I will pay the reduced annual membership fee (e.g. with low income, as a student, as a pensioner, as a family member or as an underage person) of EUR 60.00   I will pay in the 1 <sup>rd</sup> year of membership the reduced annual trial membership fee for new members without existing publication of EUR 60.00 − from the following year then the regular € 100.00   I will pay as supporting member the minimum fee of € 60.00   I will pay as supporting member the minimum fee of € 60.00   I will pay as supporting member the minimum fee of € 60.00   I will voluntarily pay a higher annual membership fee of a total of EUR With a mandate, the contributions will be collected by direct debit. The association sends an invoice - in the following years in April for the current fiscal year (April to March). Contribution discounts between October and December (50%) are automatically considered. If you start between January and March, the contribution for the following year is due immediately, these three months remain free of contribution. All dissisting the deviating from the regular annual fee are at the discretion of the member and can be adjusted annually if necessary. Membership is automatically renewed for a further year if it is terminated not later than 15th March of each year.  SEPA Direct Debit Mandate (Creditor identifier of the SAZ: DE 56 ZZZ 00000 196 84 1):  By signing this mandate form, you authorise the Spiele-Autoren-Zunft e.V. (SAZ) to send instructions to your bank to debit your account and your bank to debit your account and your bank to debit your account was debited. This mandate within eight weeks starting from the Spiele-Autoren-Zunft e.V. The mandate reference (membership number) will be sent separately from the SAZ office. Note: As part of your rights, you are entitled to a refund from your bank under the terms and conditions of your agreement with your bank. A refund must be claimed within eight weeks starting from the date on which your account was d						
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We are looking forward to welcoming you in the SAZ!

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