

Please return this form to:

Deutsch-Amerikanische Juristen-Vereinigung

Fax:++49-228-357972

mail@dajv.org

Membership Form

Personal Data:

*	First name:	*Last name:
*	Mr. / Ms.:	Date of birth:
*	Delivery Address:	
	Firm / Company:	
	Contact person (for Fee Group 5):	
	Street:	
	ZIP code, city:	Country:
*	Tel. (office):	Tel. (private)
	Mobile (office):	Mobile (private):
	Fax (office):	Fax (private):
	E-mail (office):	E-mail (private):

Fee Groups (check one):			
The DAJV will not send an invoice. The annual fee is nevertheless due at the beginning of each calendar year (= year of contributions) and payable by 31 March . Your payment and contributions are tax deductible.			
	<i>Group</i>	<i>Description</i>	<i>Annual Fee</i>
<input type="checkbox"/>	1	Individual Member	80.00 Euro
<input type="checkbox"/>	2	Spouse / Partner of a single member – messages will be sent only once	40.00 Euro
<input type="checkbox"/>	3	<input type="checkbox"/> Legal clerk (not yet admitted to Bar) <input type="checkbox"/> Graduate student jurist <i>with an annual gross income of less than € 15,000.00 (Please attach a certificate of appointment, matriculation certification) **</i>	40.00 Euro
<input type="checkbox"/>	4	<i>Law student (attach matriculation certificate) **</i>	30.00 Euro
<input type="checkbox"/>	5	Company / law firm “institutional member“	300.00 Euro
<input type="checkbox"/>	6	Single member, body, employee, partner or agent of a GALA institutional member. GALA messages will be sent to the law firm or company address alone.	40.00 Euro

* DAJV Section membership (please check a circle and provide an e-mail address as provided for above, as notices will be sent by e-mail):	
<input type="checkbox"/> Merger & Acquisition (M & A)	<input type="checkbox"/> Arbitration/Litigation/Mediation (ALM)
<input type="checkbox"/> Tax	<input type="checkbox"/> Constitution/Legislation/Public Law
<input type="checkbox"/> Antitrust/Regulated Industries/Media (ARIM)	
Other Memberships (networking):	

Career / Education	
* Profession / Position:	
* Legal degree(s) (J.D., LL.M.):	* Date(s) of completion:
* Universit(y)ies (exact name):	
* Bar passage in year:	* State admitted:
Other University degree(s) (BA, BS, MBA, PhD):	
Date(s) of completion:	
Universit(y)ies (exact name):	

I authorize publication of my data (*) within the association over the online member-directory. Note: You must agree to this to become a member.

(Place/date/signature)

DIRECT DEBIT AUTHORIZATION

Until I cancel this authorization in writing, I / we agree that my/our membership fee will be debited directly by the DAJV from my /our banking account in Germany

from the Account No:

IBAN / SWIFT:

at the Bank:
(full name, address)

NOTE: The DAJV will not send an invoice hereto. The annual fee is nevertheless due at the beginning of each **calendar year (= membership year)**. It will be debited by 31 March of each year at latest.

(Place/date/signature)