

# Registration Bowling charity tournament



## Participant

Company / Group / Club

Number of participants

Age #1

Address

Name of participant 2

Age #2

Name Teilnehmer 3

Age #3

Name of participant 4

Age #4

Name of participant 5

Age #5

E-mail address:

Telephone number for queries



## Registration fee

For children between 6 and 12 years: **5,00 €**

For children from 13 years and adults : **10,00 €**

I pay by direct debit

I pay by bank transfer

## Subscribe to Newsletter

Yes, I agree that my e-mail address will be included in the e-mail newsletter of the Kindheitstraum Stuttgart e.V. The newsletter will be sent to me regularly via email and contains information of the association on current promotions, announcements, blog and news content, on wish fulfillment, events and meetings. My agreement can be revoked at any time.

## Permission for images to be created at the event

Yes, I irrevocably agree that images on which I am pictured, without any temporal, local and content restriction of Kindheitstraum Stuttgart e.V. on the Internet, in print, any known and future medium, even for advertising purposes without time limit may be published without having to pay me compensation. Kindheitstraum Stuttgart e.V. committed to use this only in the sense of the association's purpose.

**Dream-Bowl Böblingen**

**Leibnizstr. 18 71032 Böblingen**

**Tournament is on 22.07.2018. Start is 10:00 clock**

**Please send registration to :**

**[kontakt@kindheitstraum-stuttgart.de](mailto:kontakt@kindheitstraum-stuttgart.de)**

## Debit authorization

I hereby authorize Kindheitstraum - Stuttgart e.V. to collect the fee to be paid once from the following account by direct debit:

Account number

Bank code

IBAN

BIC

Bank name

Surname, first name of the account holder (s)

If my / our account does not have the required coverage, there is no obligation to redeem from the account-holding credit institution. Partial redemptions are not made.

City

Date

Signature of account holder

Please use the following bank details for the transfer:

**Bank account of the association: IBAN: DE62602500100015118334, BIC: SOLADES1WBN**

City

Date

Signature of the participant or, in the case of minors, the parents

Please send registration to: [kontakt@kindheitstraum-stuttgart.de](mailto:kontakt@kindheitstraum-stuttgart.de)

Kindheitstraum Stuttgart e.V.

Möwenweg 21  
70378 Stuttgart

Tel: 0711 / 21 57 0770 Fax: 0711 / 21 57 0773  
[kontakt@kindheitstraum-stuttgart.de](mailto:kontakt@kindheitstraum-stuttgart.de)

Registered:

Registered non-profit association at the  
district court Stuttgart

Donate:

IBAN DE62 6025 0010 0015 1183 34  
BIC: SOLADES1WBN

