

MEMBERSHIP APPLICATION FORM



as of 05/01/2017, last edited 08/19/2019

<input type="checkbox"/> Individual Membership Application fee (one-time): 60 Euro	<input type="checkbox"/> Company Membership <input type="checkbox"/> up to 5 members <input type="checkbox"/> up to 10 members Application fee (one-time): 60 Euro (Please enclose the company membership registration form for persons)	<input type="checkbox"/> University Membership Application fee (one-time): 60 Euro (Please enclose the university membership registration form for persons)
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You can find the current list of the membership fees and the articles of tekomb Deutschland on our WebPortal at www.tekom.de/downloads.

Are you a student, trainee, volunteer or participant at a tekomb-accredited educational institution?

Then please use the membership application for students, trainees, volunteers or participants in advanced training programs at tekomb-accredited educational institutions.

I. Postal Address

Ms. Mr.

Title/First Name/Last Name**

Street/Number/P.O. Box**

If postal address is the same as the company address, please fill in the following fields:

City/Postal Code/Country**

Email**

Company Name 1

Phone

Company Name 2

Fax

Department

Email for electronic invoices

II. Invoice Address if different, please fill in:

Line 1

Line 2

Street/Number/P.O. Box

City/Postal Code/Country

Order Number of Your Company

Please note: If your membership fee is paid by your company, this application form must be signed below by the person in charge.

Place/Date

Company Name

Name

Department

Signature + Company Stamp

Member recommendations:

I was recommended by (First Name, Last Name)

tekomb Deutschland Membership Number

Reward request (www.tekom.de)

* Unemployed and retired persons pay a reduced membership fee provided they submit a certification with the application form.

** **Required fields;** must be filled in.

Period of notice: 3 months from the end of the respective calendar year.

III. Consent

I hereby declare that the details given in this membership application are true, and hereby also request membership in the Gesellschaft für Technische Kommunikation – tekomp Deutschland e.V. (referred to hereinafter as: tekomp Deutschland) for myself/for the company or institution of higher learning that I represent, as per the details mentioned at the outset. Furthermore, on signing this application, I make the following declarations concerning myself or for the company/institution of higher learning that I represent:

1. I acknowledge the articles of association as binding. The articles of association are available on the tekomp Deutschland WebPortal. The same is applicable to the resolutions passed by the committees of tekomp Deutschland and other guidelines for cooperation, such as the tekomp Deutschland code of conduct and the tekomp Deutschland rules of compliance.

2. I consent to the details specified by me, as well as those that may be provided in the future, being stored in the tekomp Deutschland/tekomp Europe member database (referred to hereinafter as: data) for the duration of the membership, and used by tekomp Deutschland in managing the association and for the internal organization of the association, such as sending election-related documents, invitations to member assemblies, announcements of association events and advertising services for members, or invitations to the meetings of regional groups. I will receive the association's internal announcements by email and occasionally by mail. My consent includes the use of data by tcworld GmbH, service provider for tekomp Deutschland, when this is necessary for the provision of services.

Place, Date

Signature of the Applicant*

3. Until I explicitly revoke consent, which is possible at any time, I agree to receive further notifications of new tekomp publications, invitations to upcoming events, conferences (such as, for example, the tekomp conference), and training programs from tekomp Deutschland and tcworld GmbH, event service provider for tekomp Deutschland/tekomp Europe, also by mail, email or phone. Until such revocation, I consent to tekomp Deutschland/tekomp Europe and tcworld GmbH using my data for the purposes listed above. I may send a revocation of consent at any time to tekomp Deutschland at the contact information listed below. My data will not be given or sold to third parties.

Place, Date

Signature of the Applicant

IV. SEPA Direct Debit mandate (only possible with EU bank accounts)

If a SEPA Direct Debit is authorized, a fee reduction in the amount of 7.50 Euro will be granted.

The membership fee is due at the beginning of the calendar year. The amount will be billed at the beginning of every February. The SEPA Direct Debit mandate can be canceled by me at any time. I hereby authorize tekomp Deutschland to withdraw the amount of the membership fee from my account according to the applicable fee list until such cancellation.

Name of the Bank

IBAN

BIC

Account Holder (First Name, Last Name)

Place, Date

Signature of the Applicant**

* Signature is required for tekomp Deutschland membership.

** Signature is required for payment by SEPA Direct Debit mandate.

V. Details about Your Occupation (optional)

Your Position in the Company:

- | | | |
|---|--|--|
| <input type="checkbox"/> Managing Director | <input type="checkbox"/> Team Leader | <input type="checkbox"/> Specialist |
| <input type="checkbox"/> Head of Department | <input type="checkbox"/> Project Manager | <input type="checkbox"/> Assistant |
| <input type="checkbox"/> Self-employed | | <input type="checkbox"/> Own Company with salaried employees |
| <input type="checkbox"/> Teacher/Professor | | <input type="checkbox"/> Other: |

Industry Sector in Which You Are Active (check only one box please):

We need your industry sector to be able to address you in an industry-specific manner.

A. Products

<input type="checkbox"/>	01	Chemical, pharmaceutical and biotechnological products; goods made of rubber and synthetics
<input type="checkbox"/>	02	Manufacturing of food items and semiluxury food

B. Plants, machinery, devices, production technology

<input type="checkbox"/>	03	Machine tools and tooling machines; special mechanical engineering; manufacturing systems; drive and forwarding technology; industrial tools (incl. electrical tools)
<input type="checkbox"/>	04	Construction of large plants and power systems
<input type="checkbox"/>	05	Engine and control technology; robotics; automation; electrical motors; testing and measurement equipment; electronic systems
<input type="checkbox"/>	06	Combustion motors; turbines; ovens; burners
<input type="checkbox"/>	07	Sanitary technology; building and industrial armatures
<input type="checkbox"/>	08	Heating and cooling technology; fuel cells; pumps; compressors; pressure equipment
<input type="checkbox"/>	09	Medical equipment (incl. electromedical applications); laboratory equipment; orthopedics
<input type="checkbox"/>	10	Optical devices
<input type="checkbox"/>	11	Defense and military technology; weapon systems; marine technology

C. End-user devices

<input type="checkbox"/>	12	Domestic appliances; devices and tools for household handicrafts (electrical as well as non-electrical)
<input type="checkbox"/>	13	Consumer electronics (including audio and video devices and their components, radio, television, telecommunication, mobile telephones); office devices (including printers, scanners, photocopying machines)

D. Electrical and electronics

<input type="checkbox"/>	14	Installations and equipment for electronic data and information processing (hardware, peripherals); messaging and communications technology
<input type="checkbox"/>	15	Electronic and electromechanical components and modules; switching devices; electronic control systems and regulators; electro-installations; lighting and illumination technology, fallback systems

E. Automobiles and aircraft

<input type="checkbox"/>	16	Automobile engineering (powered vehicles, commercial vehicles, construction vehicles, farming and special vehicles, equipment)
<input type="checkbox"/>	17	Suppliers to the automobile industry
<input type="checkbox"/>	18	Aerospace technology

F. Software

<input type="checkbox"/>	19	Software development (data processing, databases)
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G. Retail, banking and insurance

<input type="checkbox"/>	20	Organization, IT consulting, training in banking and insurance
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H. Public administration

<input type="checkbox"/>	21	Organization, IT consulting, training in commerce and public administration
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I. Services

<input type="checkbox"/>	22	Creating technical documentation (authoring, graphic design, composition, layout)
<input type="checkbox"/>	23	Foreign language translation
<input type="checkbox"/>	24	Printing services; publishing
<input type="checkbox"/>	25	Engineering services
<input type="checkbox"/>	26	Other services for technical documentation (including software consulting; data processing services, CE-label and certification: risk analysis, certification)

J. Basic and advanced training

<input type="checkbox"/>	27	Private providers of basic and advanced training
<input type="checkbox"/>	28	Publicly funded colleges and universities, including college teachers
<input type="checkbox"/>	29	Private commercial schools and vocational schools, including teachers
<input type="checkbox"/>	30	Students (school or college level)

K. Others (please indicate the sector)

<input type="checkbox"/>		
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Company Membership Registration Form for Persons

The following persons will be registered in the tekomp company membership:

Please fill in up to 5 persons for the reduced company membership and up to 10 persons for the extended company membership.

The first entry on the list will be contact person for tekomp.

	Ms.	Mr.	Title	First Name*	Last Name*	Email*	Phone	Department	Position (Page 3 on Application Form)
1.	** Contact person for the company membership:								
2.									
3.									
4.									
5.									
6.									
7.									
8.									
9.									
10.									

* Required fields; must be filled in.

** If the contact person should not be included in the company membership, please enter the name here:

Ms.	Mr.	Title	First Name*	Last Name*	Email*	Phone	Department	Position (Page 3 on Application Form)

Please enter the name of the person responsible for entries in 'my tekomp' (i.e. Jobs or Service database). This person must be a tekomp member.

Administrator for 'my tekomp':

Ms.	Mr.	Title	First Name*	Last Name*	Email*	Phone	Department	Position (Page 3 on Application Form)

Kindly send us the attached form with your application form via fax: +49 711 65704-99, via email: info@tekom.de

or via mail to: Gesellschaft für Technische Kommunikation – tekomp Deutschland e.V., Rotebühlstraße 64, 70178 Stuttgart, GERMANY