VIKTOR FRANKL ZENTRUM VIKTOR FRANKL MUSEUM VIKTOR FRANKL SeminarZENTRUM

VIKTOR FRANKL CENTER VIENNA
DECLARATION OF MEMBERSHIP (valid for one year)

TYPES OF MEMBERSHIP:

○ Simple membership (€ 35,00) ○ Logotherapist (€ 50,00) ○ Family (€ 45,00)

○ Student (€ 25,00) ○ Pupil (€ 10,00)

PERSONAL DATA:

Academic Title:

Forname:

Surname:

Date of birth:

Adress:

Postal Code:

City & State:

ACCOUNT FOR MEMBERSHIP:

Owner of account: VIKTOR FRANKL CENTER VIENNA
Name of the bank institute: RAIFFEISEN
BIC: RLNWATWWGTD
IBAN: AT 42 3225 0000 0195 5343

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(city and date) (signature)