

Indescon Membership Form

Indisch-Deutsches Software Competence Netzwerk e.V., Stammheimer Strasse 10, D-70806 Kornwestheim

Company Information

Name of Company _____

Address _____

Website _____

Primary Contact Information

Name of Primary Contact _____

Phone Number / Email _____ / _____

I herewith request membership to the Indisch-Deutsches Software Competence Netzwerk (Indescon) e.V of the following level:

_____ Basic (€ 10,00 per month)
_____ Corporate (€ 45,00 per month)
_____ Premium (€ 95,00 per month)

19% VAT Applicable to abovemembership fees.

The membership is to start effective 01/ ____ / _____ (01/mm/yyyy).

Membership dues will be paid monthly to the below bank address

Please debit the membership fees from my below bank account (Lastschriftverfahren).

Bank: Schwäbische-Bank, Stuttgart
Account Owner: Indisch-Deutsches Software
Competence Netzwerk
Account#: 9722
Bank Code: 600 201 00
IBAN: DE35600201000000009722
SWIFT/BIC: SCHWDESS

Bank: _____
Account Owner: _____
Account#: _____
Bank Code: _____

Membership dues should be charged to below Credit Card on a monthly basis

Card Type: _____ (Visa/Mastercard/etc)

Name on Card: _____

Card Number: _____

Expiration Date: _____

CVC#: _____

Signature:

Date / Location: _____ / _____

Signed by: _____

On behalf of (company): _____

Fax: +49-7154-82-7131

<http://www.indescon.org> - Phone: +49-7154-82-7130 - email: info@indescon.org - Updated 24.07.2009
Vereinsregister Stuttgart: VR 720468 | Vorstandsvorsitzender: Ashant Chalasani