



Membership application

I like to join the GLAS Automobileclub e.V.:

Name _____ First Name _____

Address _____

City, State, Zip _____

Telephone _____ Mobil _____

Date of Birth _____ eMail _____

I own the following GLAS vehicles:

Model	VIN number	Year	Condition
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

I understand that the information provided will be stored by the GLAS Automobile Club International for only internal purposes. I will contact the club immediately if there are any changes. I have read and accept the GLAS Automobilclub International e.V. By-Laws.

Date _____ Signature _____

Members outside of Germany can make their annual dues payments by personal check in their local currency to their international club contact (payable to the person) or to our club account in Germany via wire transfer in Euros:

Zollernalb Sparkasse, BLZ 653 512 60, account no. 134030582,
IBAN: DE32 6535 1260 0134 0305 82, SWIFT-BIC: SOLADES1BAL