

# Membership Application

## **Zippo Club Austria**

Please mail completed form along with payment in full to the address below.

Address:  
**Zippo Club Austria**  
**Glossystrasse 14a**  
**A - 1140 Vienna**  
**AUSTRIA - EUROPE**

E-Mail:  
**office@zippoclub.at**

(Europe-) Bank Account:  
**Volksbank Wien**  
IBAN: [AT404300045202402009](#)  
BIC / SWIFT: [VBOEATWW](#)

Homepage:  
**www.zippoclub.at**

### **Membership Dues** (1 year):

**Europe: 27,- €**

**Overseas: 34,- €**

The membership fee is payable at the joining of Zippo Club Austria and in January of the following years. If you join us from October to December your membership fee counts also for the following year. Leaving the club is possible anytime, but you have to inform us in written form. In this case we will not refund the fees.

You must be 18 years of age to register with Zippo Club Austria.

In case of changing your particulars, please inform us as soon as possible.

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### **- REGISTRATION -**

First Name: ..... Last Name: .....

Address: ..... City: .....

ZIP (Postal) Code: ..... Country: .....

Birth Date (optional): ..... Gender:  male /  female

@ E-Mail: .....

Phone number (optional): .....

Website (optional): .....

**By registering with Zippo Club Austria, I agree to the terms and conditions in the Zippo Club Austria agreement.**

**Date:**

**Signature:**

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