



Application for membership

I hereby declare to join the non-profit association "Upendo Face Orphanage Foundation".
The membership fee is 30 CHF per year. With the membership I accept the statutes of the association.

Information about my person

Name: _____ Surname: _____

Street and house number: _____

Zip code, city, country: _____

Phone: _____ E-Mail: _____

I agree to pay the membership fee of 30 CHF per year to the association "Upendo Face Orphanage Foundation" to the association's account by March 31st of each year.

City, date: _____ Signature: _____

Bank account:

Corinne Ulmann

Note: Membership fee Upendo Face Orphanage Foundation

St. Galler Kantonalbank Switzerland

IBAN: CH52 0078 1031 3853 0200 2

Account-Nr. 0313.8530.2002

Bank-Clearing-Nr. 781

Or:

The easiest way is to donate directly with your credit card via our website ("Donate online with your credit card")

Note: A withdrawal from the association is possible at any time. Your personal data will only be used for internal club and bank purposes and will not be passed on to third parties.