

# STUDIEVERENIGING

Kvk: 34159343

De Boelelaan 1081 - Kamer TK18

1081 HV Amsterdam

Mail [bestuur@mens-vu.nl](mailto:bestuur@mens-vu.nl)



## Direct Debit Mandate - SEPA

Incassant ID: NL62ZZZ341593430000

Kenmerk machtiging\*:

By signing this form you give authorization to

Medische Natuurwetenschappelijke Studievereniging

to send continuous direct debit orders to your bank to deduct an amount from your *account*. You also give permission to your bank to continuously deduct an amount from your account corresponding on behalf of

Medische Natuurwetenschappelijke Studievereniging en Mens-AC

Furthermore the undersigned gives permission that, at the time of signing, any overdue fees will be automatically collected at once, with a single direct debit.

If you disagree with the deduction, a refund is possible. Please contact your bank within 8 weeks of deduction. Ask your bank about the terms.

Medische Natuurwetenschappelijke Studievereniging is authorised to use direct debit until the undersigned withdraws the authorization themselves. The withdrawal of the authorization can be written to the address above.

Name:

.....

Address:

.....

Zip code:.....

City: .....

Country: .....

IBAN:

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Bank

Identification\*\*: .....

Date: ..... - ..... - .....

City:.....

Signature: \_\_\_\_\_

\* To be filled in by the board

\*\* Not mandatory for Dutch IBAN