Registration form SV De Baronie

Family name: …….. Prefix: ……

First name: …….. Initials: …….. M / F

Address: ……

Postal code: ……... Residence: ……..

Date of birth: ……

Phone number: ……

Emailaddress: ……

The undersigned (if a minor, the parent or guardian),
If underage, the name of the parent or guardian: ……

Hereby declares the intention to join SV de Baronie in Breda as of the date below, against payment of the applicable membership fee as (check what applies):
□ Principal member;
□ Double member (You are a principal member of another Dutch chess association);
□ Student member;
□ Youth member;

He / she agrees to the use and disclosure of personal data as described in the Association's privacy statement (available on the website and in the playroom):
□ Yes
□ No

He / she agrees to the use of images for the website and social media of SV De Baronie**:**
□ Yes
□ No

He / she wants to participate in the following competition(s):
□ internal □ External KNSB (Saterday)□ Evening NBSB

If applicable:
□ Previous chess association: …… □ Rating: ……

He/she would like to participate in chess lessons::
□ Yes -------- □ Chess lessons for beginners
-------- □ Chess lessons for advanced
□ No

Breda, Date: …… Signature: ….....