

BODYGUARD ACADEMY GERMANY

HEAD QUARTERS
FRANKFURT

MEMBERSHIP FORM

Tel: +49 697 895 832 / +49 172 690 4623 (GERMANY)

POSTFACH 940127 PLZ 60459 FRANKFURT AM MAIN



PERSONEL DATA

Name: _____
Adress: _____
ZIP Code: _____ - _____ City/Town: _____ Tel: _____
Cel: _____ E-mail: _____
Date of Birth: _____ Marital status: _____
I.D. n.º: _____ Issued/valid _____ by: _____

BIOMETRIC DATA

Height (m): _____
Eye Color: _____
Badge Nº: _____ Tel: _____

MEMBERSHIP FORM

1 YEAR: € 60.00 / 2 YEAR: € 110.00

Courses you wish to attend: _____

The **BAG** as a teaching entity, therefore it does not guarantee nor promise work or employment to their students. The **BAG** guarantees the strict confidentiality and treatment of your data. The information that you provide will not be shared to other entities and it will be used only for the purpose of the course that you are attending. Unless the attendee gives his personal approval by checking one of the option below.

- a) I authorize my data to be disclosed to other entities
b) I DO NOT authorize my data to be disclosed to other entities

The first payment of the **BAG** Course is Non-Refundable, in case of quitting from the attendee, since this happens of his own free will and according to his explicit wish.

All payments should be made to:

JORGE GASPAR -BODYGUARD ACADEMY GERMANY

IBAN: DE 2350 0700 2407 3650 0 000

BIC/SWIFT CODE: DEUTDEDBFRA

Date: _____

Signature: _____