



**YES, I want to train martial arts (boxing/kickboxing/bjj) with De Grondleggers from the start of period 4 of the academic year 2021-2022.** (If you subscribed at the start of the academic year you do not need this form.)

**You are required to have yearly (not monthly) student SCB sports rights if you wish to train with us!**

First name: ..... Last name:..... Initials: .....  
 Date of birth (dd-mm-yyyy): ( \_\_ - \_\_ - \_\_\_\_ ) Nationality: .....  
 E-mail (we use your.name@wur.nl if available): .....

I am a *WUR BSc / WUR MSc / STOAS / 1<sup>st</sup> year graduate / PhD\** student  
 \*Strikethrough non-applicable. A limited number of PhD students is allowed to join us.  
 (Student) registration number: .....  
 WBA number (barcode on your WURcard, see image below): ( \_\_\_\_\_ )



**Your subscription is not valid without this number!**  
 This number is only valid *after* you purchased sports rights.



Contribution fee for the **second half (end of period three/ start of period four!)** of 2021-2022: €15 allows you to practice any art we have to offer without limitations.

Visit [www.grondleggers.wur.nl](http://www.grondleggers.wur.nl) to read our house rules. Our website should also provide answers to any further questions you might have. If you still have questions, do not hesitate to contact us via [wsbv.grondleggers@wur.nl](mailto:wsbv.grondleggers@wur.nl) !

**Payment: mandate for one off collections – S€PA**

Name creditor : De Grondleggers  
 Address creditor : Bornsesteeg 2  
 Postal code creditor : 6708 PE Place of residence creditor : Wageningen  
 Country creditor : The Netherlands Creditor Identifier : NL93ZZZ401239080000  
 Mandate reference : Contribution fee second half 2020-2021

By signing this mandate form, you authorize De Grondleggers to send a one off collection instruction to your bank to debit your account for **€ 15,00** and your bank to debit your account on a one-off basis. If you do not agree with the debit, you can arrange for its refund. Please contact your bank within eight weeks from the date on which your account was debited. Ask your bank for the conditions.

Name : .....  
 Address : .....  
 Postal code : ( \_\_\_\_ )( \_\_ ) Place of residence : .....  
 Country : .....  
 Account number [IBAN] : ( \_\_\_\_ )( \_\_\_\_ )( \_\_\_\_ )( \_\_\_\_ )( \_\_\_\_ )  
 Bank Identification code [BIC]\* : ..... \* Not an obligatory field for Dutch accountnumber  
 Place and date : ..... Signature