

SPONSORSHIP AGREEMENT

Name: _____ First name: _____

Street, No.: _____ ZIP code, City: _____

Email: _____ Phone: _____

I would like to take over a sponsorship contribution

☐ monthly (€35) ☐ annually (€420)

I agree to the following data protection regulations:

Support International e.V. may electronically store your postal address as well as your first and last name in order to send you reports about the sponsorships, donation receipts, annual reports, and occasional invitations to events organized by Support International e.V. in Germany. This data will not be passed on to third parties unless we are legally obliged to do so.

If you do not agree to this, please let us know for which purposes we should not use your data. You may also request the deletion of the above-mentioned data.

Please send your notification by email to: erica.berni@supportinternational.de or by post to:
Support International e.V., Eugen-Papst-Straße 10, 81247 Munich, Germany.

Please contact me as soon as the documents for my sponsored child have arrived (usually after about 4 weeks).

Place, Date: _____ Signature: _____

Please send this form to:

patenschaften@supportinternational.de