Turn- und Sportverein Zeven e.V.



Place, date, signature

Office: Auf dem Berge 8, 27404 Zeven, Telefon: 04281 / 1881, FAX: 04281 / 950019 E-Mail: info@tuszeven.de, Internet: http://www.tuszeven.de Gläubiger ID-Nr. des TuS Zeven: DE53ZZZ00000058767

Bank account: Sparkasse Rotenburg-Bremervörde: IBAN: DE19 2415 1235 0000 4099 95 BIC: BRLADE21ROB Zevener Volksbank eG: IBAN: DE53 2416 1594 0047 0015 00 BIC: GENODEF1SIT

Declaration for adult asylum-seekers to participate in sports activities of the TuS Zeven e.V. without a membership beginning on:

Surname: Given name: Postcode/residence:				Telephone: Profession: Date of birth.:								
							Street:			E-Mail:		
							De	partment (please tick all that ap	pply):			
	American Football		Swimming		G	ymnastics						
	Badminton		Skittle			l Aerobic						
	Soccer		Sport shooting			l Fitness l Dancing						
	Handball		Ping pong			Children's gymnastics						
	Judo		Volleyball			Artistic gymnastics						
	Athletics											
A n rest see	e asylum-seeker mentioned above in membership is needed only to parti- cricted to 6 months. After 6 months ker has been granted asylum, he or inted asylum can no longer have a f	cipate in c s, we have she has to	competitions. Free jet to check if the par o tell the office of t	participation in sports acticipant still qualifies as	tivit an a	ies of the TuS Zeven is initially asylum-seeker. If the asylum-						