ARMFORCE BASEL
Armwrestling Verein

MEMBERSHIP FORM

ARMFORCE BASEL

Please fill out the form below to register for membership

☐ Terms & Conditions :

You have read and you agree to our AGB's (see attached PDF).
If you are under 18 your legal guardian has to agree and sign this as well.

First Name : Name :

Full Address :

E-Mail : Phone :

Date Of Birth : D D M M Y Y Gender : ☐ M ☐ F

Personal Information

Do you have experience with Armwrestling? ☐ No ☐ Yes

Do you declare any disability? ☐ No ☐ Yes, please specify:

Where did you learn about us? ☐ Friends ☐ Internet ☐ Instagram Other:

Membership

- ☐ **Annual (Fee: 200.- CHF)**
- ☐ **6 Months (Fee: 120.- CHF)**
- ☐ **1 Month (Fee: 30.- CHF)**

Membership Student

- ☐ **Annual (Fee: 150.- CHF)**
- ☐ **6 Months (Fee: 90.- CHF)**
- ☐ **1 Month (Fee: 20.- CHF)**

Other Memberships*

- ☐ **Benefactor member (Annual Fee: 300.- CHF)**
- ☐ **Passive member (Annual Fee: 150.- CHF)**

**Explained in the AGB's & Statuten*

Tournament License (optional)

- ☐ **School Student (Free)**
- ☐ **21+ (Fee: 100.-)** ☐ **Under 21 (Fee: 50.-)**

In case if you are under 18, We need contacts of your legal guardian:

Full Name :

Relationship : Phone :

location & Date

Signature Of Author

Signature Of Guardian
(only if under 18)

More Information :
support@armforcebasel.ch
www.armforcebasel.ch