



Gütegemeinschaft Flachglas

Data Entry

The following information is only used to complete the master data of the association. Please fill out this form completely and legibly.

Company details:

Name (acc. Commercial Register): _____

Street, zip code, town: _____

PO box, zip code, town: _____

Phone: _____ Telefax: _____

Internet: _____

E-Mail: _____

Management of the company (owner, managing director, authorized signatory etc.):

Name, first name	Function	Date of birth
------------------	----------	---------------

_____	_____	_____
-------	-------	-------

E-Mail: _____

_____	_____	_____
-------	-------	-------

E-Mail: _____

Additional contact persons:

Name, first name	Function	Date of birth
------------------	----------	---------------

_____	_____	_____
-------	-------	-------

E-Mail: _____

_____	_____	_____
-------	-------	-------

E-Mail: _____

(Place and date)

Company stamp/legally binding signature



Gütegemeinschaft Flachglas

Information on data protection

Dear members,

The protection of your personal data is important to us. The data collected by the Gütegemeinschaft Flachglas e.V. is used exclusively to manage and fulfil your active or passive membership as a member of the association.

We process the following data from you: Salutation, title, first name, surname, address, date of birth, email address, telephone/mobile number, bank details for SEPA direct debit, date of joining and leaving membership and newsletter.

We process personal data in order to fulfil the membership contract (Art. 6 para. 1 lit. b GDPR).

I hereby give my consent for the Gütegemeinschaft Flachglas e.V. to send me the to send me newsletters.

I can revoke this consent at any time for the future.

The cancellation should be sent by email to: info@guetegemeinschaft-flachglas.de

Or by post to: Gütegemeinschaft Flachglas e.V.
Mülheimer Straße 1
53840 Troisdorf

The data will only be passed on to third parties if the Gütegemeinschaft Flachglas e.V. is legally obliged to do so.

I hereby consent to the use of the above data. If there is more than one contact person, please sign individually.

(Location, Date) (Signature)

(Location, Date) (Signature)

(Location, Date) (Signature)

(Location, Date) (Signature)