

**Application form temporarily membership
Form 2 according § 15 no. 2**
(up-to-date 2015 02 02)



Name: _____ Surname: _____

Date of birth _____ Nationality: _____

profession _____

home address _____

phone _____ fax _____

mobile _____ e-mail _____

German address _____

mobile: _____ e-mail _____

My home club is _____ and is affiliated to the Polo Association _____

My highest rating in the world is ____ goals which I achieved in (country / year) _____

In Germany I play mostly for (club) _____

I do confirm that I have coverage of the following insurance:

Third party liability insurance Yes No

Third party liability for horses insurance (in case that I do play my own horses) Yes No

Voluntary information:

Medical/health insurance Personal Accident Insurance (Accidental Death / Permanent Disability)

The annual fee of € 220,00 will be transferred to the underneath bank account, in cash or is attached by cheque. (please cross out what is not appropriate)

I herewith apply for a temporarily membership of DPV and confirm with my signature that I am in full agreement with all DPV rules and regulations even when not mentioned in this application.

date: _____ signature: _____

Confirmation of German club or Team Captain:

We herewith confirm the above stated dates and support the application

date: _____ Signature club or team captain _____