**Antrag für die Aufnahme in den**

**Donnerstag Club Oberaargau**

**Personalien:**

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| Vorname / Name |       |

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| Geburtsdatum |       |

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| Berufstitel |       |

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| --- | --- |
| Funktion/Stellung |       |

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| --- | --- |
| E-Mail Adresse |       |

**Geschäft:**

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| --- | --- |
| Firma |       |

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| --- | --- |
| Strasse  |       |

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| PLZ/Ort |       |

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| Telefon |       |

**Privat:**

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| Strasse |       |

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| PLZ/Ort |       |

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| --- | --- |
| Telefon |       |

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| Ort, Datum |       |

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| Unterschrift |       |