

As successor to the American Historical Association Berlin, our goal is to further the interest of our international membership in the history of Berlin.



Clayallee 135
14195 Berlin

MEMBERSHIP APPLICATION FORM

Surname/Family Name

(For Family membership please give names of all family members)

First Name(s)

(For Family membership please give names of all family members)

Street name

House number

PLZ/Post Code

City

Nationality

Date of Birth
(DD/MM/YYYY)

Telephone Home

Telephone Work

Mobile

Fax

E-Mail address (Will be used by BHA for all correspondence)

General Data Protection Regulations. BHA is required to comply with the GDPR because it processes and stores individuals' personal information. This personal information is known only to the President, the Secretary and the Treasurer. No such information is shared with any other organization or individuals. Members have a right to be "forgotten" if they resign from BHA and may ask for their details to be deleted from all records. BHA assumes that it has the consent of all applicants to process and store their name, address, telephone number and email address unless any member desires otherwise. Should any member have concerns about the use of their personal details, they are welcome to discuss it with the Board.

Membership fees are: One time joining fee €10 Annual single member €35 Annual family member €50

Once your application has been approved you will be requested to pay the annual subscription (full or half-year) and the joining fee. Subsequent annual subscriptions are due by 31 Jan each year.

I wish to apply for Single/Family membership

(Please strike out whichever does not apply)

Signature:

Date:

Please send the completed form to:

Berlin Historical Association
Clayallee 135
14195 Berlin

or by E-Mail to: Office@bha-ev.org

One final question: How/through whom did you hear about BHA?