Master in International Public Management and Public Policy Alumni Association (IMPAA)

Continuous SEPA direct credit mandate

IMPAA information (to be filled out by IMPAA)

	IMI AA IIIIOIIIIadoii (d	o be filled out by first AA)
Ī	Address	Burgemeester Oudlaan 50, 3062 PA Rotterdam
	Creditor ID	NL64 ZZZ 6747 6899 0000
	Mandate reference	
	Personal information	
Γ	First Name	
ľ	Last Name	
	Initials (as on file with the bank)	
	Date of birth (dd/mm/yyyy)	
L	Email address	
	Address	
Γ	Street	
ľ	Number (+ addition)	
	Zip code	
	City	
	Country	
E	Bank account	
Ī	IBAN	
	BIC (or bank name)	
	Name (as mentioned on card)	
	Privacy	
	credit mandate. Your in	ve listed information to process your membership and continuous SEPA direct formation will be processed according to GDPR standards as out-lined in the ion. Please check the box below that you agree with IMPAA processing your
	\square I hereby declare that I understand and agree with IMPAA processing the above information.	
	Mandate	
	By signing this mandate form you authorize IMPAA to send recurrent collection instructions to your bank to debit your account and you authorize your bank to debit your account on a recurrent basis in accordance with the instructions from IMPAA. In case you have objections against this deduction you may reverse it. In order to do so contact your bank within eight weeks after your account has been debited. Ask your bank for the terms and conditions.	
	Date:	
	Signature:	
	SIGITALATO.	