

Deregistration form

If you want to cancel your membership at 'Studievereniging der Psychologie Labyrinth' you have to fill out this form, attach your membership card and send it to Labyrinth before the 1st of August.

**These fields are required.*

Last name*:

First name*: Initials:

Date of birth (dd-mm-yyyy)*:

Student ID-number:

Address*:

Postal code*: City*:

E-mail address*:

International Bank Account Number (IBAN)*:

Do you still have your membership card? (If 'yes' please attach it to this form)* Yes No

By signing this form you state that you would like to end your membership at 'Studievereniging der Psychologie Labyrinth' by the next possible date.

Date (dd-mm-yyyy): **Signature:**

Attach your membership
card here