

REGISTRATION FORM

The Fitness Centre at Aarhus University

*This form is only to be used by **staff** whose subscription fees can be withdrawn from their salaries*

Please fill in with capital letters

AU-ID:	Must be filled in
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First name
Surname
Date of Birth (DDMMYY)
E-mail (your AU-e-mail-address)
AU-Card number (<i>if you have access/student card with AU logo</i>)
Place of work (<i>not abbreviation</i>)
Address and building number
Phone (private or work)

The membership fee of DKK 125.00 per month will be withdrawn from your AU salary.

This form should be signed and sent to **medlemsreg-lonAU-motion@au.dk**

After having submitted the registration form, please wait for an email or a letter from the Fitness Centre.

Date: _____

Signature of member _____

The member is notified of the Fitness Centre's regulations and undertakes to obey these

Date: _____

Signature of fitness centre officer _____

Information for Payroll

Payroll code: 9046	Amount: 125.00	Start date:
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