

Receipt stamp Amt 09

Magistrat der Stadt Frankfurt am Main Hauptamt und Stadtmarketing 09.2 Referat für Internationale Angelegenheiten Sandgasse 6 60311 Frankfurt am Main

Application

for the visit program of children and grandchildren of former Jewish Frankfurt citizens and the ones who were politically or religiously persecuted

\Box female \Box male \Box diverse

Family Name		First Name		
Maiden Name	Date of Birth	Place o	Place of Birth	
Street name and house number				
ZIP code	City		State	Country
E-Mail		(Mol	(Mobile) phone number with country code	

Personal data of 🛛 🗆 Parents 🖓 Grandparents

Father respectively Grandfather

Family Name		First Name	
Maiden Name	Date of Birth	Place of Birth	
Lived in Frankfurt am Main from / to		Last Address in Frankfurt am Main	

Mother respectively Grandmother

Family Name		First Name	
Maiden Name	Date of Birth	Place of Birth	
Lived in Frankfurt am Main from / to		Last Address in Frankfurt am Main	

Parents / grandparents did participate in the visiting program

Name	Year of invitation	□ No, my parents / grandparents did not participate at the programme.

A copy of my proof of identity (e.g. ID or passport) is attached to the registration.

□ With a document which I attach to this application, I prove that my parents/grandparents have a direct biographical connection to Frankfurt am Main. For example, a birth or marriage certificate of the parents /grandparents or another document

I hereby certify that the above complete statements are correct and true and declare that I belong to the group of persons interested in the visiting program for children and grandchildren of former Jewish Frankfurt citizens and the ones who were politically or religiously persecuted.

Date

Signature

According to § 18 of the Law on the Data Protection of Hessen we are obliged to inform you that your address and your personal data will be stored in an automatic data file for continuing service.