

Mr / Mrs

firstname _____

lastname _____

date of birth _____

telephone _____

fax _____

street _____

zip / city _____ / _____

e-mail _____ @ _____

desired e-mail: _____ @we-care-a-lot.org



Your membership fee is 12€. It has to be payed in cash or send this application with 12€ included to **Blank & Jeron po-box 380234 - 10972 Berlin.**

voluntary statements

1. online handicap:
domain register addiction
chat addiction
fear of losing passwords
fear of losing bookmarks
access problems
transmission problems
other (please give a short description): _____

2. implication
physical derogation
mental derogation
financial derogation
social derogation

3. since when are you suffering of your online handicap?
since 1 year
about 2 years
about 3 years
more than 3 years

4. grade of handicap faintly / medium/heavy / very heavy / burned out (0% - 100%)

location, date, signature
