

Registration form

To become or renew your membership of the ESCG please complete this form and return it to email address below. By becoming a member of the ESCG you will help us to organise the ESCG sessions at the ECVIM-CA congress and create a network to improve knowledge on gastrointestinal diseases.

congre	ess and create a network to improve	knowledge on gastrointestina	al diseases.
Title _			
First n	ame	Last name	
Institu	te		
Postal	address		
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Zip co	de		
City		Country	
Teleph	one nr	Fax nr	
Email	address		
Gastro ECVIM Once p	s to renew his/her membership / be enterology. This membership gives -CA congress. payment has been received an offici er, or by PayPal if you are UK or US I	you among others a fee reduc	tion when registering for the annual
	on the privacy notice below, could you riate responses as selected by you: I allow the ESCG to continue to store about wanting them removed or unti	my personal data until I inform th	owing points by deleting/indicating the nem YES/NO
-	I allow the ESCG to use my information including relevant third parties	n for marketing purposes,	YES/NO
-	I allow the ESCG to continue to conta news and other society-relevant info	•	YES/NO
submitted information address, a	ean Society of Comparative Gastroenterology (ESCG; no by you to allow us to communicate and deliver informa on for marketing purposes including keeping you up to do nd email address. We will securely store this information	ion services to you and to allow us to contact yo te with new services and promotions. This infor from its submission, for subsequent use, until y	ollege of Veterinary Internal Medicine) uses information ou for membership-related purposes. We may also use your mation may include your name, affiliation, physical business ou tell us not to do so. We will update our membership list ta removed, we will delete your data from our database.
Please	circle the years you wish to becom	e member for 2022 / 2023 / 2	2024
I will pay: (Please tick the appropriate boxes)		es) By:	
□ € 25 (for one year),		□ bank trans	sfer, (please make sure that any bank
□ € 60) (for three years),	costs will be	covered by yourself)
) (for three years, for those in trainii		nly if UK or USA based; please provide a
	ship, residency, PhD: please provide		ddress for the PayPal request to be
	ou are in training).	sent to)	
Signat	ure (please sign):		

(D. Dill. The Neither Levels)

Return to: escg.info@gmail.com

European Society of Comparative Gastroenterology (De Bilt, The Netherlands)

Contact: escg.info@gmail.com

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