

**MEMBERSHIP FORM**

Join ENGAGe and benefit from the opportunity to apply for a grant to attend the ENGAGe Patient Seminar taking place each year, at the same time as the ESGO Conference. You will also benefit from participating in ENGAGe projects and enjoy the networking and educational opportunities within the network.

Membership of the ENGAGe network is free.

***Name of your patient group/organisation:***

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***Country:***

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***Contact Name:***

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*Position in patient group/organisation:*

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*Contact Email Address: Phone No:*

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*Organisation/patient group email: Website (if any):*

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***Description of your organization/patient group, its mission, structure and activities*** *(150 words)*

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*Does the patient group have actively maintained social media platforms? (Facebook, twitter, Pinterest, etc.). If yes, please copy the addresses of these platforms here:*

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*Constitutional group´s document (e.g. articles of association) or relevant document of group registration is a mandatory part of the application*

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*I agree to share the contact email and the group emails as stated above within the ENGAGe network*

*Date: \_\_\_\_\_\_\_\_\_\_*

*Name: Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*