

INVOICE/RENEWAL OF MEMBERSHIP 2010

Member type	Jan 1- March 31	April 1 - June 30	After July 1	TOTAL
Ordinary	125 €	150 €	175 €	
Corresponding	50 €	75 €	100 €	
Senior (> 65 yrs and retired)	50 €	75 €	100 €	
Junior (< 35 yrs)	40 €	60 €	80 €	

Optional:

ETA Pin*	20 €		
Donation to EFED (ETA Foundation for Endowment and Development)	Suggested minimum 25 €	Other amount:	
Overall total			

* all proceeds will be donated to EFED, see www.eurothyroid.com for details

NB: Persons who register for the ITC as a "member" must have paid their annual fee prior to registration.

Methods of payment:

Credit Card Name of Member: _____ Signature: _____

Email: _____ Date: _____

Please charge my – VISA CARD MASTER CARD

Card number (please write clearly): _____

Expiry date: ____/____

Bank transfer (please also fax a copy of the transaction)

Bank account (all bank charges must be paid by the sender)

Recipient: European Thyroid Association e.V. IBAN: DE96750200730609787198 Swift/BIC: HYVEDEMM447 For transfers within Germany: Acct.-No.: 609787198 BLZ: 75020073 Please indicate: ETA Membership and your name	Name and Address: HypoVereinsbank AG Niederlassung Regensburg Hemauerstr. 1, 93047 Regensburg, Germany
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Please mail or fax this form to:

ETA STANDING OFFICE

Attn. Sandra Crutchley

EndoScience

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ETA Standing Office

EndoScience Endokrinologie Service GmbH

Contact: Sandra Crutchley

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Registered Charity Number: VR200481