

Application/Renewal Form for Individual or Institutional Membership 2024

Welcome to the European Association of Mental Health in Intellectual Disability in 2024. We appreciate your application/renewal for membership very much.

With this membership you can receive free online access to the Journal of Intellectual Disability Research (JIDR).

Please complete this form by filling in your personal data and emailing it to the treasurer of EAMHID: treasurer@eamhid.eu. This allows us to update our database.

Name & Surname:																		
Organization:																		
Address:																		
Zip Code:																		
Country:																		
Email Address:																		
Telephone Number:																		
Type of Membership	Please indicate the type of membership: Individual <input type="checkbox"/> Institutional <input type="checkbox"/>																	
Institutional Members:	<p>Costs: Individual membership: €85/year. Institutional membership: € 400/year.</p> <p>Company members can register up to 5 persons; please indicate any specific members:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="width: 5%;"></th> <th style="width: 45%;">Name:</th> <th style="width: 50%;">Email Address:</th> </tr> </thead> <tbody> <tr> <td>1.</td> <td></td> <td></td> </tr> <tr> <td>2.</td> <td></td> <td></td> </tr> <tr> <td>3.</td> <td></td> <td></td> </tr> <tr> <td>4.</td> <td></td> <td></td> </tr> </tbody> </table>				Name:	Email Address:	1.			2.			3.			4.		
	Name:	Email Address:																
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SIG Membership	<p>Do you want to become SIG member for the Network of Europeans on Emotional Development: Congress (NEED) group?</p> <p>Yes <input type="checkbox"/> No <input type="checkbox"/></p>																	
Consent:	<p>I consent that all information provided above can be securely stored and used for administrative purposes for 2023. You may revoke this consent at any time by sending a request to treasurer@eamhid.eu.</p> <p>I consent <input type="checkbox"/> I do not consent <input type="checkbox"/></p> <p>I consent to be contacted by EAMHID regarding future congresses and other relevant information, e. g. by newsletter. You may revoke this consent at any time by sending a request to treasurer@eamhid.eu.</p> <p>I consent <input type="checkbox"/> I do not consent <input type="checkbox"/></p>																	

Payment Details:

Within the EU, bank transfers are free; from outside the EU, please cover the cost of the transfer. When transferring your membership fee, please indicate the year of membership and name.

Bank: KBC Belgium
IBAN: BE47 7390 1226 8780
Reference: 2023 and your name and surname

Bank account: EAMHID
BIC/Swift code: KREDBEBB

Conditions: Membership is for 1 year. The fiscal year of the Association is from 1st of January to 31st of December. Cancellations must be made by email to treasurer@eamhid.eu. No refunds will be given.

SIGNATURE: _____ **Date:** _____