



## European Society of Contraception and Reproductive Health

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## Membership Form 2010

Please use the online membership form, available at

[http://www.contraception-esc.com/membership\\_application\\_form\\_2010.htm](http://www.contraception-esc.com/membership_application_form_2010.htm)

This hard copy form is only for those who do not have internet access.

### Membership Form for Individual Members only

Members of Affiliated Groups should not use this form – see under ‘Affiliation’ or contact [esccentraloffice@contraception-esc.com](mailto:esccentraloffice@contraception-esc.com) for more information.

### Personal details

Last name (family name)	
First name	
Title	<input type="radio"/> Prof.Dr. <input type="radio"/> Dr. <input type="radio"/> Mrs <input type="radio"/> Ms <input type="radio"/> Mr
Complete your address here – we would prefer your work address but your private address is fine. Please do not mix both.	
Institute/organisation	
Department	
Street & nr/House name	
Postal code and City	
Country	
Email address	
Date of birth (DD/MM/YYYY)	
Gender	<input type="radio"/> Male <input type="radio"/> Female

### Your profile

Which of the following best describes your professional group?	
Please highlight only one option and complete the corresponding list :	
<input type="radio"/> Medical Doctor	<input type="radio"/> Physician <input type="radio"/> Gynaecologist / Obstetrician <input type="radio"/> General Practitioner / Family Doctor <input type="radio"/> GU medicine/venereology <input type="radio"/> Paediatrics <input type="radio"/> Contraception/Sexual health <input type="radio"/> Research <input type="radio"/> Education <input type="radio"/> Other – please state:
<input type="radio"/> Nursing	<input type="radio"/> Nurse <input type="radio"/> Health Visitor <input type="radio"/> Education <input type="radio"/> Research

	<input type="radio"/> Other – please state:
<input type="radio"/> Midwife	
<input type="radio"/> Counsellor (non medical, non nursing)	
<input type="radio"/> Student	<input type="radio"/> Medical <input type="radio"/> Nursing <input type="radio"/> Other – please state :
<input type="radio"/> Other (Please state):	

## Online information

The ESC will rebuild its website. The new website is expected to go live before May 2010 and will offer a members only section that can only be accessed after personal login.

We will create your personal account as soon as the website is ready. A personal login and password will allow you to view and change the above information (personal details and profile).

The website will offer members the option to search for the email address (not the postal address and not the profile) of a colleague, who is also a member. We would need your authorization to include you in this search facility:

I agree       No, please arrange that my name and email address cannot be found

## Payment section

AMOUNT DUE: 50 EURO  
(including the Journal of Contraception and Reproductive Health Care)

Tick here your payment preference:

<input type="radio"/> Please charge my card	
Card type	<input type="radio"/> Mastercard <input type="radio"/> VISA
Card N° (16 digits)	
Exp date (MM/YY)	
CVC code (last 3 digits at the back of your card)	
Cardholder (as it appears on your card)	
Signature	

<input type="radio"/> I made a bank transfer in EURO to ESC account N° (IBAN) BE45 3101 2639 1389 ING bank SWIFT code: BBRUBEBB Bank address: ING bank, Marktplein 26, B-1740 Ternat, Belgium No bank costs to the ESC
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