

2020 Membership Application

Non Profit Organisation Member

Non profit Organisation Members are all organisations, associations or other entities who adhere to European Glut1 Deficiency Organisation, and share its purposes

Non Profit Organisation name: _____

City, State: _____

Web site: _____

Legal representative:

(Name) _____

(Email) _____

(Mobile phone) _____

First representative in G1D Europe:

(Name) _____

(Email) _____

(Mobile phone) _____

Second representative in G1D Europe: (optional)

(Name) _____

(Email) _____

(Mobile phone) _____

Natural Person Member

Natural Person Member will be admitted only in countries where there is no non profit organization or other entities that are already associated with European Glut1 Deficiency Organisation

First name: _____

Last name: _____

Address: _____

City, State: _____

Date of birth: _____

Email: _____

Mobile phone: _____

Important Note:

Natural Person Member will be admitted only in countries where there is no non profit organization or other entities that are already associated with European Glut1 Deficiency Organisation.

Failure to do so will entitle the European Glut1 Deficiency Organisation consider payment made as a donation and not as a membership fee.

Non Profit Organisation Membership Fee: **€ 150,00**

Natural Person Membership Fee: **€ 30,00**

Bank: Banca Prossima

IBAN: IT15 E033 5901 6001 0000 0166 151

BIC: B C I T I T M X

or

click "[Pay Now](#)" to pay with PayPal or Credit Card

I understand that failure to make payment will result in suspension or cancellation of my membership.

I declare that I have read, understood and agree to abide by the European Glut1 Deficiency Organisation Statute.

Email this application forms to: info@g1deurope.org

Signature: _____

Date: _____