|  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Name of Institute** | | |  | | | | | | | | | | |
| **Street** | | |  | | | | | | | | | | |
| **Nr** | | |  | | | | | | | | | | |
| **Zip** | | |  | | | | | | | | | | |
| **City** | | |  | | | | | | | | | | |
| **Country** | | |  | | | | | | | | | | |
| **Institute VAT number\*** | | |  | | | | | | | | | | |
| **Name of contact person** | | |  | | | | | | | | | | |
| **E-mail of contact person** | | |  | | | | | | | | | | |
|  | | **Package 30 members** | | **Last Name** | **First Name** | | **Title** | **Date of Birth** | **E-mail** | **Department** | **Specialty** | **I want to receive the hardcopy of the Green journal. (Only for fill members)** | **In my quality of ESTRO member, I agree with the ESTRO privacy notice\*\*** | **I agree to receive the ESTRO newsletter and targeted information on ESTRO activities** | |
| **1** | | Ambassador | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
|  | |  | |  |  | |  |  |  |  |  |  |  |  | |
| **2** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **3** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **4** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **5** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **6** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **7** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **8** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **9** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **10** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **11** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **12** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **13** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **14** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **15** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **16** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **17** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **18** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **19** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **20** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **21** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
| **22** | | Active | |  |  | |  |  |  |  |  | Yes - No | Yes - No | Yes - No | |
|  | |  | |  |  | |  |  |  |  |  |  |  |  | |
| **23** | | In training | |  |  | |  |  |  |  |  | Not applicable (only e-journal) | Yes - No | Yes - No | |
| **24** | | In training | |  |  | |  |  |  |  |  | Not applicable (only e-journal) | Yes - No | Yes - No | |
| **25** | | In training | |  |  | |  |  |  |  |  | Not applicable (only e-journal) | Yes - No | Yes - No | |
| **26** | | In training | |  |  | |  |  |  |  |  | Not applicable (only e-journal) | Yes - No | Yes - No | |
| **27** | | In training | |  |  | |  |  |  |  |  | Not applicable (only e-journal) | Yes - No | Yes - No | |
| **28** | | In training | |  |  | |  |  |  |  |  | Not applicable (only e-journal) | Yes - No | Yes - No | |
| **29** | | In training | |  |  | |  |  |  |  |  | Not applicable (only e-journal) | Yes - No | Yes - No | |
|  | |  | |  |  | |  |  |  |  |  |  |  |  | |
| **30** | | Affiliate | |  |  | |  |  |  |  |  | Not applicable (only e-journal) | Yes - No | Yes - No | |
| **Package 30 members fee: 2310 EUR (excluding 21% VAT)** | | | | | | | | | | | | | |
| **Payment can be made by Bank transfer:** | | | | | | | | | | | | | |
| Bank account of ESTRO at the “KBC”, St Jacobsplein 32, 3000, Leuven, Belgium  Bank account number: BE88 428 6084721 41  Swift: KREDBEBB  IBAN: BE88 428 6084721 41  Please indicate the name of your institute on the transfer order and attach proof of payment. | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | |
| **Invoicing address (only if different from the abovementioned address)** | | | | | | | | | | | | | |
| Name of Institute | | | | | | | | | | | | | |
| Street | | | | | | | | | | | | | |
| Nr | | | | | | | | | | | | | |
| Zip | | | | | | | | | | | | | |
| City | | | | | | | | | | | | | |
| Country | | | | | | | | | | | | | |
| **Please return this form to:**  ESTRO  Rue Martin V, 40  1200 Brussels, Belgium  E-mail: [institutional-membership@estro.org](mailto:institutional-membership@estro.org)  Tel.: +32 2 775 93 40 | | | | | | | | | | | | | |
| **Institutional membership is designed to assist hospitals, clinics or other institutions that are providing Radiotherapy and Oncology treatment with the continued development and support of their professionals.**  **Rules and regulations:**   * **Only available for European institutions that apply with a minimum of 5 individual members** * **Minimum 3 specialties (clinicians, physicist, RTT, biologist, dosimetrist, IT specialist, supporting engineer, etc.) have to be represented in the package** | | | | | | | | | | | | | |