**APPLICATION FOR MEMBERSHIP OF THE EAPCCT (version 2022)**

Family name and initials

First Name

Gender:……………………………………………………[ ]  Male [ ]  Female [ ]  Non-binary

Year of birth

Degrees/Qualifications:

Primary position:

Institution:

Professional address:

City / Mail code:       /

Country:

Phone (     )

Fax (     )

E-mail

Secondary E-mail

*Note: EAPCCT mailings are sent electronically - please provide E-mail addresses!*

**Address for delivery of the journal *Clinical Toxicology***

(**ONLY** required if different from above and if you have chosen to receive paper copies of the journal):

Address:

City / Mail code:       /

Country:

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| **I wish to pay my EAPCCT Membership Fee for: 2023 / 2024 / 2025****Member:** (**includes** subscription to online1 *Clinical Toxicology*)

|  |  |  |  |  |  |
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| One year | [ ]  180 Euro | Two years | [ ]  330 Euro | Three years | [ ]  480 Euro |

**AACT / ACMT / APAMT / APC / Menatox Member**2**:** (**excludes** subscription to *Clinical Toxicology*)

|  |  |  |  |  |  |
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| One year | [ ]  130 Euro | Two years | [ ]  240 Euro | Three years | [ ]  350 Euro |

**Associate Member**3**:** (**excludes** subscription to *Clinical Toxicology*)

|  |  |  |  |
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| One year | [ ]  130 Euro | Two years | [ ]  240 Euro |

**Retired Member:** (**includes** subscription to *Clinical Toxicology*)

|  |  |  |  |  |  |
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| One year | [ ]  130 Euro | Two years | [ ]  240 Euro | Three years | [ ]  350 Euro |

**Emeritus Member:** (**excludes** subscription to *Clinical Toxicology*)

|  |  |  |
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| One year | [ ]  Free or | [ ]  65 Euro with subscription to *Clinical Toxicology* |

*1 From 2013 on, membership includes only the electronic subscription accessible via the EAPCCT website; printed copies of the Journal can be ordered separately for EUR 65.**2 You may opt to be an associate member for a maximum period of two years only. Thereafter, you will automatically become a member and must pay the full membership fee.***Method of payment:**

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| [ ]  | via EAPCCT website by credit card. **This is preferred!** |
| [ ]  | transferring the fee to the EAPCCT bank account **Account no. *310-1926549-21*** at the ***ING Bank, Zone Center, Région Européenne,Rond Point Schuman, 1040 Brussels, Belgium*. For IBAN and BIC codes see below.**If paying by bank transfer please ensure you provide your name and an identifying reference for the trans-action. (e.g. *Hondebrink, Laura - EAPCCT Membership 2023/2024/2025*). This is particularly important ifyour institution pays your membership fee! |
| [ ]  | Eurocard – Mastercard (please enter details next page) |
| [ ]  | VISA (please enter details next page) |
| [ ]  | American Express card (please enter details next page) |

**Please return to the General Secretary by e-mail gs@eapcct.org****accompanied by a short curriculum vitae.****Only fill if you do not wish to pay via the EAPCCT website by credit card (which is preferred) anddo not wish to pay via bank transfer.**

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