

European Association of Health Law

Individual Members Application Form

Applicant Title

Applicant Family Name

Applicant First Name

Address

Address

Address

Address

City

Region

Postcode

Country

Please tick the category of membership for which you are applying. Please note that EJHL subscriptions [see below] are only available to Full and Associate members

Full membership

Associate membership

Student membership

If Student, please give title of your course

Reduced Subscription to European Journal of Health Law. Please tick the box if you wish to take out the reduced rate subscription to EJHL at a cost of €60 per annum

EJHL Subscription

Work Telephone [including country code]

Mobile Telephone [including country code]

[optional]

Home Telephone [including country code]

[optional]

Fax [including country code]

EAHL will communicate both in writing and via email. If you consent to us sending you emails please give your address below

Email address

Organisation with which you are affiliated [if any]

Job Title/Status

Organisation's Website [if applicable]

Do you have a personal webpage or blog?

EAHL conducts much of its work through Working Groups. If you wish to be added to the mailing lists of a working group please tick as many of the boxes as you wish

In order to help EAHL to focus its efforts in areas of greatest benefit to members we need to know about your interests. Please can you put one "keyword" in each of the boxes below.

Research and Networks

Teaching and Training

Institutions

Keyword 1:

Keyword 2:

Keyword 3:

Keyword 4:

Keyword 5:

In order to apply for membership you must show support from 2 existing members of the EAHL. Please follow the instructions at the end of this form.

Sponsoring member 1 name

Sponsoring member 1 ID

Sponsor 1 Signature

Sponsoring member 2 name

Sponsoring member 2 ID

Sponsor 2 Signature

All application forms must be sent electronically to itandip@ed.ac.uk with the Subject line: EAHL Membership.

In addition, EITHER

a) print the form and get each sponsor to enter their name and their EAHL ID number and sign the form personally. THEN send a copy of the signed form to the EAHL Executive Director, Room B.79, School of Law, Old College, South Bridge, Edinburgh EH8 9YL;

OR

b) ask each sponsor to confirm their support by sending an email to itandip@ed.ac.uk giving their EAHL ID number as well as your name, with the Subject line: EAHL Membership Sponsor.
