

**Membership Form
September 2018 – September 2019**



To show your organisation meets membership criteria, please complete the following.

We are a voluntary organisation	Yes/No
Voluntary organisation – an independent, self-governing body of people who have joined together voluntarily to take action for the benefit of the community. It may employ paid staff or volunteers, and must be established to benefit the public, not specific individuals.	

We work for the benefit of people with Charcot-Marie-Tooth Disease	Yes/No
The work of organisations may cover other conditions, but should have a dedicated section for people with	

Our aims, objectives and methods of governance are written down in a publically available document	Yes/No
Please attach your governing document when submitting your Membership form.	

We are properly constituted having been formed and organised in a correct and way.	Yes/No
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Your organisation

Name of organisation	
Charity number	
The aims and objectives of your organisation:	

Organisation's Details

Name (main contact for organisation)	
Job title	
E-mail address	
Phone number (including country code)	
Website	http://
Postal Address (must include postal or zip code)	
Country	
I enclose confirmation of the 2018 Subscription of €250 Euros. An invoice will be provided on request.	<input type="checkbox"/> By PayPal to paypal@ecmtf.org <input type="checkbox"/> By Bank Transfer (BELFIUS IBAN: BE60 0689 0838 0270, BIC: GKCCBEBB)
Along with this agreement, I have ensured that	<input type="checkbox"/> My organisation's logo to be shown on the Federation's website is attached. <input type="checkbox"/> The correct link has been provided above for listing on ECMTF.org. Please also provide any additional wording you would like shown on our website.

Name of Authorised Representative to ECMTF

Name	
Link to Member charity	
E-mail address	
Phone number (including country code)	
Postal Address (must include postal or zip code)	
Country:	

Fondation Universitaire, 11 Rue D'Egmont, B-1000 Brussels

Email: membership@ecmtf.org

Your right to vote on resolutions at the ECMTF General Assembly

In order to vote in the Trustee election and on resolutions, your organisation must be a properly constituted non-profit organisation in your country of origin.

Only the individual specified on this form will be able to vote on resolutions at the ECMTF General Assembly. If your organisation's representative changes, please resend this form.

If you would also like to become a member of the Board of ECMTF, please ask for an application form.

We require authorisation by the head of your organisation that you are the proposed Representative of the ECMTF on your organisation's behalf

I am authorised by (organisation name)

.....

to propose as the Representative of the ECMTF (nominee's name)

.....

and will advise the ECMTF immediately should s/he cease to be associated with our organisation.

Date: Name:

Position: Signature:

I agree to act as the Representative of ECMTF on behalf of my organisation and to vote on resolutions at the General Assembly.

Date: Name:

Position: Signature:

Please return this form by email to membership@ecmtf.org

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