*Letterhead National Society*

**Associate member of ESAIC (European Society of Anaesthesiology and Intensive Care)**

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|  **Please tick the box and sign**[ ]  I hereby request as a member of the (name of the society) to become an associate member of the ESAIC and approve that the (name of the society) shares the following data with the ESAIC: **First name**: **Last name**:**email address**: Date:Click or tap to enter a date. |