



# International Society For Apheresis

## European Group

### Membership Application Form

Name:	
Title:	
Date of Birth (DD.MM.YYYY):	
Email:	
Type of membership:	<input type="radio"/> Ordinary member <input type="radio"/> Associated member <input type="radio"/> Sustaining member <input type="radio"/> Gold <input type="radio"/> Silver <input type="radio"/> Bronze
Position:	
Department:	
Institute/Company:	
Street, house number:	
City:	
Postal code:	
Country:	
Telephone:	
Fax:	
Already a member of the ISFA?	<input type="radio"/> Yes <input type="radio"/> No
ISFA membership number: (if member of the ISFA)	
I hereby agree to the bylaws and membership fee regulations of E-ISFA e. V. and to support the statutory goals of E-ISFA e. V..	

Signature, Date: \_\_\_\_\_

E-ISFA e.V.  
Address: Friedrich-Barnewitz-Straße 8 in 18119 Rostock  
Internet: [www.e-isfa.eu](http://www.e-isfa.eu) | Headquarter of the association: Rostock | Registration: Amtsgericht Rostock VR  
Tax number: 079/141/19426

Executive board: Prof. Dr. Bernd Hohenstein (Chairman) | Dr. Wolfgang Ramlow (Vice Chairman)  
Dr. Jens Ringel (Secretary/Treasurer), PD Dr. Volker Schettler, (Counselor)

Bank details: Deutsche Apotheker- und Ärztebank eG, IBAN: DE50 3006 0601 0005 3301 84, BIC: DAAEDEDXXX