

Membership 2024

**APPLICATION FORM**

The AEPM is the officially recognised representative body of the Emergency Physicians of Malta both locally and internationally. It is a formal affiliate of the European Society of Emergency Medicine (EUSEM).

**Eligible applicants are:**

* **Full members:** Specialists in Emergency Medicine\*.
* **Associate members:** Trainees in Emergency Medicine\*.

*\* As per AEPM statute, the council reserves the right to refuse applications notwithstanding eligibility.*

**Fee is 45 Euros for EVERYONE.**

**DEADLINE : 7th November 2024**

**Reasons to become an AEPM member:**

1. Discounts on fees of selected conferences, courses and other events.
2. Free access to the AEPM website which will have the latest updates, important uploads, links and communications for Emergency Physicians. **PLEASE NOTE THAT AFTER 1st November 2024 ONLY PAID UP MEMBERS WILL BE ALLOWED TO ACCESS THE MEMBERS AREA.**
3. Invitations to attend the AEPM CME evenings or webinars which are part of the training programme in EM and carry important CME points. **PLEASE NOTE THAT AFTER 7th November 2024, ONLY PAID UP MEMBERS WILL BE ALLOWED TO JOIN.**
4. A €50 discount on US courses organised by the ‘Ultrasound Academy Ltd.’ **PLEASE NOTE THAT ONLY PAID UP MEMBERS BEFORE THE COURSE APPLICATION WILL BENEFIT FROM THIS SCHEME.**
5. The AEPM will forward its members’ names to EuSEM to avail themselves of ‘affiliate discounts’ in EuSEM conferences.
6. Issue of annual CME/AEPM points.
7. Voting during ordinary or extra-ordinary AEPM meetings and elections.
8. Access to members’ social media.

If you are interested to join , please complete the below application and return it by

**e-mail to** [**treasurer.aepm@gmail.com**](mailto:treasurer.aepm@gmail.com) **AFTER your bank transaction. If you do not return this signed form, even if you pay, I would not be able to include you as a member because of GDPR laws. Following this procedure you will get your e-receipt.**

FINALLY please note that **NO** refunds under €20 are possible in case of mistakes, in view of bank cheques regulations. Therefore please make sure that you only pay €45.

**Dr Justine DeGray**

**Hon.Treasurer AEPM**

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***Please fill in the below details, SCAN or take a photo, and return to*** [***treasurer.aepm@gmail.com***](mailto:treasurer.aepm@gmail.com) ***AFTER your online payment***

***Application for AEPM FULL MEMBER or ASSOCIATE MEMBER (fill in accordingly)***

**Name & Surname: \_**

**ID number : \_**

**Date of Birth : \_**

**Current Grade: \_**

**E-mail address: \_**

**Home address: \_**

**Mobile telephone number: \_**

**I have read the GDPR statement below and consent to it : YES / NO *(please delete accordingly)***

**Methods of payment:**

* **BOV Mobile:** Following your personal log in, GO to Payments at the bottom of the screen, and choose ‘PAY A BILL’, select your account from which you want to pay, a list of companies comes up, scroll until you find ‘ASSOCIATION OF PHYSICIANS’, fill in your details and due payment and conclude transaction. If someone else is paying for you, please tell them to write your name plus AEPM membership fee.
* **REVOLUT:** Use BANK OF VALLETTA, IBAN NUMBER MT23VALL22013000000040016004791

**Name:** AEPM **Address:** Mater Dei Hospital, Triq id-Donaturi tad-Demm, Msida. MSD2090.

**Please write your name, ID number and reason for payment.**

* **Internet bank transfer:** 
  + **IBAN :**    MT23VALL22013000000040016004791
  + **BIC:**        VALLMTMT
  + **BANK:**    BOV

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*Signature Date of submission*

***Short GDPR statement:*** *The personal details you submitted with your application will only be used for the AEPM’s administration and to share with EuSEM and other entities as part of its affiliation and sharing of members data for the scope of ‘affiliate membership’ and members’ grants. Data will not be given to other parties unless duty-bound by Maltese or European laws.If you have any objections to this, please send us an e-mail to* [***treasurer.aepm@gmail.com***](mailto:treasurer.aepm@gmail.com)