



Payment of Membership Fee

Print name: I _____ hereby pay my EHS membership dues of €150 for 2021 and give permission for my name to be listed as a member on the society's website.

Please choose **1** of the following **2** payment options:-



1. **€150** SEPA Bank Transfer payment

For SEPA Bank Transfer, please contact your bank directly with the information below, using your NAME as your REFERENCE. Thank you.

Account name: **EHS** Address: **A-6020 Innsbruck, Austria**

Bank: **HYPO-BANK TIROL, Innrain 47a, 6020 Innsbruck, Austria**

BIC/SWIFT: **HYPTAT22** IBAN: **AT275700030053218145**



2. **€150** Credit Card payment

For Credit Card Payment (Visa or Mastercard only), please complete:-

Name on Card _____

Card number (16-digit)

Expiry

CVC2 Code (next to signature on card)

Signature _____ Date _____ City _____

IMPORTANT:-

Kindly access your Hip International digital subscription via the EHS website www.europeanhipsociety.com Log in (you should know your username and password - if not, please ask Samantha) and click "Media" on the homepage.

If you want to also receive the printed journal, tick here:

Please return this form to samstokesehs@gmail.com

Thank you