**ATG Membership**

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| --- | --- |
| \*Name: | Enter your name. (mandatory) |
| Pubmed name: | Enter your PubMed name. |
| GABBA Edition: | Enter your GABBA edition. |
| \*Address: | Enter your address. (mandatory) |
| Fiscal number: | Enter your fiscal number. |
| Phone: | Enter your phone number. |
| \*Email: | Enter your email address. |
| Wire transfer or PayPal confirmation number: | Enter the confirmation number. |

*\*mandatory field*

The annual dues are 20EUR.

The fees can be paid by **wire transfer** (details below), or by **PayPal** to the account geral@atg.up.pt. After completing the transfer, please include the confirmation number on the membership form.

**Associação ATG – ALL TIME GABBAs**

NIB: 0035 0285 00074467330 90

IBAN: PT50 0035 0285 00074467 330 90

BIC (Bank Identification code): CGDIPTPL

PayPal: geral@atg.up.pt