



GLOBAL LUNG CANCER  
COALITION

## Membership Application Form

Membership of GLCC is free of charge. If possible, please email the completed form to [glcc@roycastle.org](mailto:glcc@roycastle.org) Alternatively, you can print the form, complete in clear BLOCK CAPITALS, and fax to +44 (0)141 331 4530 or send by post to GLCC: c/o The Roy Castle Lung Cancer Foundation, 134 Douglas Street, Glasgow, G2 4HF, UK.

### Details of your Organisation

<b>Organisation Name:</b> (in English)	
<b>Organisation Name:</b> (in your national language)	
<b>Acronym:</b> (e.g. GLCC)	
<b>Disease Area:</b> (e.g. lung cancer only, general cancer, general respiratory organisation)	
<b>Organization area:</b> LOCAL e.g. Rome or NATIONAL e.g. Japan or REGIONAL e.g. North America	
<b>General Email Address:</b>	
<b>Website:</b>	
<b>Postal Address:</b>	
<b>Telephone Number:</b> (with country code)	
<b>Fax Number:</b> (with country code)	
<b>Organisation Chairman/President</b>	

### Details of your GLCC Representative

Please give the details of the person who will be your GLCC Representative (should be a senior position within your organisation).

<b>Name:</b>	
<b>Position:</b>	
<b>Direct Email Address (if possible):</b>	
<b>Direct Telephone (if possible):</b>	
<b>Direct Fax (if possible):</b>	

*Please turn over*

**Is your organisation a Patient organisation or an organisation of Professionals?**

- Patient
- Professional
- Both Patients and Professionals

**To be a MEMBER, you must fulfil the criteria below. Please mark each box with an “x” to show that your organisation is eligible to be a member:**

- Key focus on lung cancer patients
- Have a legal status appropriate to its country of origin.
- Be non-profit.
- Be independent of governments, political parties and commercial organisations.
- Support and demonstrate a commitment to GLCC’s goals.

**Please mark with an “x” the relevant box below to indicate your organisation’s membership status:**

- Membership
- Non-membership.

**If you have members, how many of the following members do you have?**

Professionals            .....

Patients                    .....

**GLCC would like to produce a brief summary of member organisations’ aims and activities (including news, successes, challenges etc) in our directory/web-site. Please include a paragraph of text (below) about your organisation and what work you do in lung cancer.**

<b>I confirm that the information above is accurate, and that my organisation is eligible to be a Member as defined above.</b>	
<b>Signed:</b>	<b>Name and Position:</b>
If you are sending this form back by email, please type your name in the signature space above, and mark this box with an “x” instead of signing. Marking this box is equivalent to your signature, and shows you are accepting the statement above. <input type="checkbox"/>	