



ESO Financial Aid Request

Please complete the form below in order to apply for a reduction in the registration fee or travel assistance for ESO Activities. Financial Aid will not be granted for activities outside ESO.

ESO is not able to waive the whole fee so please expect to pay a contribution yourself.

Please only complete this form once you have been accepted to participate in an ESO activity and return it to chall@eso.net

Name:	
Surname:	
Address:	
City, Country, Postcode:	
Telephone:	
Email:	
Date of Birth:	
Which ESO Activity are you attending:	
Are you a member of ESCO:	<input type="checkbox"/> Yes <input type="checkbox"/> No
What do you need ESO financial aid for:	<input type="checkbox"/> Fee <input type="checkbox"/> Travel <input type="checkbox"/> Both
Fee details:	Total Fee: Your financial aid request for the fee:
Travel costs:	Total travel costs: Your travel costs request:
Have you received financial aid from ESO in the past?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If Yes, please state how much you received and what it was for:	
Do you receive financial aid from any other third parties?	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, from who and how much?	
Are you able to help promote ESO activities to other oncology professionals in your area	<input type="checkbox"/> Yes <input type="checkbox"/> No
If yes, do you have any ideas on how you can help us with promotion?	