

To be completed by the EDRN Sponsor

Application for Associate Membership for

1. EDRN Sponsor Name (must be a Principal Investigator)

2. Please check one:

Are you requesting funds from the Steering Committee Core Funds?

Yes

No

3. Application for (check one):

Associate Member A – Basic or Clinical Research Member

Associate Member B – Resource/Technology Sharing Member

Associate Member C – Corresponding Member

Signature of EDRN Sponsor (required for application acceptance)