



European Association for Gestalt Therapy
Established 1985

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Country of Bank The Netherlands
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APPENDIX IV QUESTIONNAIRE FOR NOGTs

EAGT MEMBERSHIP NUMBER: CO-YY-MM-NO

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- 1) **NAME OF THE ORGANISATION:**
- 1.a Full name and abbreviated name (acronym):
- 1.b Complete address:
- 1.c Phone number(s):
- 1.d Fax:
- 1.e Website + e-mail address:
- 1.f Name and address (incl. Phone, Fax and e-mail) of president:
- 1.g Name and addresses (incl. Phone, Fax and e-mail) of other board members:
- 1.h Address of the EAGT-representative:
- 1.i Enclose criteria for membership (different categories, required basic education and Gestalt education). For ordinary membership one category has to fulfill the criteria of EAGT;
- 1.j Number of members:
- 1.k Number and list of members qualified to the level of EAGT:

