



WGO 2025 Member Society Information and Update Form

Society Name: _____
Society Number: _____

Returning this form is necessary for the WGO Executive Secretariat to proceed with processing your 2025 membership dues. If you have any questions, comments, or concerns, please reach out to membership@worldgastroenterology.org. We look forward to receiving your updated form!

Society E-mail:	_____
Society Address:	_____ _____
City:	_____
State/Province:	_____
Code:	_____
Country:	_____
Current Number of Society Members (this is required for us to issue an invoice):	_____
Publication(s): (Journals/magazines published by your Society)	_____
Society Website:	_____
Society Facebook Page:	_____
Society Twitter / X Handle:	_____
Society LinkedIn Page:	_____
Society Instagram:	_____
Other Society Social Media Account(s):	_____
Date Your Society Was Established:	_____
Upcoming Annual Organizational Meeting:	_____
Start Date and End Dates:	_____
Location:	_____
Do you want this event listed on WGO's online Conference Calendar?	<input type="checkbox"/> Yes or <input type="checkbox"/> No
If so, please provide the following information:	

City and Country: _____
E-mail: _____
Website: _____

Upcoming Organizational Anniversaries/Milestones: _____
(Example: Celebrating 50 Years in 2025)

OFFICER INFORMATION

PERMANENT SECRETARIAT:

Title: _____
First Name: _____
Middle Name: _____
Last Name: _____
Credentials: _____
E-mail: _____

PRESIDENT:

Title: _____
First Name: _____
Middle Name: _____
Last Name: _____
Credentials: _____
E-mail: _____

SECRETARY GENERAL:

Title: _____
First Name: _____
Middle Name: _____
Last Name: _____
Credentials: _____
E-mail: _____