



Consent Form for SWG Chairs Organizing Scientific Meetings

I, _____, (fill in the name) acknowledge and agree to the following terms and responsibilities as an applicant seeking to organize a scientific meeting under the support of the European Hematology Association:

1. Responsibility for Information: I understand that as an SWG Chair/Vice-Chair applying to organize a scientific meeting, I am solely responsible for the accuracy, correctness, and completeness of the information provided in the application.
2. Checking Meeting Dates: I acknowledge that it is my responsibility to initially check the proposed dates to avoid overlaps with other meetings and events organized by other societies or entities to prevent scheduling conflicts.
3. Checking overlap with other similar meetings: I acknowledge that I checked the possible overlap with other scientific/educational activities that just happened and are planned to be organized this year or next year by other hematology societies and there should not be such an overlap.
4. Proposing Meeting Format and Target Audience: I understand that I am expected to propose the format of the scientific meeting and identify the target audience per the meeting goals and objectives I outlined.
5. Collaboration and Communication: I acknowledge the importance of collaborating with relevant stakeholders, communicating effectively with the organizing committee, and adhering to timelines and milestones set forth by the organization.

I hereby certify that I have read, understood, and agree to abide by the responsibilities outlined above as a SWG Chair/Vice-Chair applying to organize a scientific meeting. I understand that compliance with these responsibilities may result in the reconsideration or cancellation of the meeting proposal.

Name: _____

Date: _____