Application for WGO Endorsement of Scientific Meetings 
(and Other Educational Activities)

Please complete the form below for your event to be considered for endorsement by the World Gastroenterology Organisation (WGO).

Criteria for endorsement and more information about WGO endorsed meetings are available at https://www.worldgastroenterology.org/meetings/endorsed-meetings.

Program Title: __________________________________________________________

Dates of Program: ______________________________________________________

Program Location/Venue: ________________________________________________

Attendance Expected: ____________________________________________________

Target Audience: ________________________________________________________

Program Website: _______________________________________________________

Sponsoring Companies/Organizations:
________________________________________________

________________________________________________

WGO Member Society, Training Center, and/or Regional Affiliate:
________________________________________________

Primary Organizer:
Name:  __________________________________________________________________
Address:  ________________________________________________________________

Telephone:  ______________________________________________________________
E-mail:  _________________________________________________________________

Proposed Program:  Please attach the following:
☐ Letter from the WGO Member Society stating its approval and/or support of the program
☐ Explanation of the program
☐ List of funding sources
☐ Program overview, including topics and faculty
☐ Brochures, flyers, etc.
☐ Event logo
Mechanism of Meeting Announcements and Promotions (please describe):

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

Conditions of WGO Endorsement:
If this program is approved, the organizer(s) agree to the following conditions:
☐ YES  The primary educational focus will be gastroenterology, hepatology, endoscopy, or other related discipline (please specify other):

__________________________________________________________________________

☐ YES  The program is designed for educational purposes only.
☐ YES  Presentations will uphold the highest standards of practice based on currently available evidence.
☐ YES  The program is organized under the auspices and/or with the approval, endorsement and/or support of a WGO Member Society, Training Center and/or Regional Affiliate Association, and a letter(s) is attached that affirms this support.
☐ YES  The WGO name and logo will be used in accordance with WGO policies and graphic standards. (Please note that it is the policy of WGO that its name and logo may not be displayed with that of a commercial product or service in promotional or other printed and web-based materials and publications.)
☐ YES  WGO assumes no financial responsibility or liability for the program.
☐ YES  Endorsement applies only to this single activity and must be renewed for future activities.

Review Process
Applications for WGO endorsement can be submitted at any time and will be reviewed by the WGO Scientific Programs Committee who make a recommendation to the WGO Executive Committee. The Executive Committee will make a final determination, with (in most cases) a response to the applicant within approximately 30 days.

Signature
I confirm the accuracy of the information included, and agreement with the above conditions if the activity is approved for endorsement.

__________________________________________________________________________  __________________________
Signature of Primary Organizer               Date

Please return this form along with supporting materials to:
WGO Executive Secretariat
E-mail: info@worldgastroenterology.org
Fax: +1 (414)-276-3349.