



UK ATTR Amyloidosis Patients' Association

Contact form

Join our community of people with an interest in ATTR Amyloidosis

This form gives us your permission to add you to our database so that we can keep in touch with you. It sets out your preferences for ways we may contact you and the areas about which you are happy to receive information.

Your personal data are very important to us because it helps us to further our aims of making life easier for people with ATTR Amyloidosis. Your information will only be used to further these aims and in adherence with our privacy policy to be found on our website www.ttramyloidosis.uk

Your personal data will never be shared with any third party unless you give us permission to do so.

Please indicate that you are to us processing your personal data by ticking the appropriate box below.

I consent to UK ATTR Amyloidosis Patients' Association storing and processing my data in accordance with their privacy policy: Yes [] No []

I confirm that I am over 16 years old: Yes [] No []

Name:

Address (optional):

Email:.....

Telephone:..... Mobile:

I am interested in ATTR Amyloidosis because I am a:

Patient Yes [] Relative Yes [] Carer Yes [] Asymptomatic carrier Yes []

Affected by:

Neuropathy Yes [] Cardiomyopathy Yes [] Both Yes []

My/my relative's genotype/mutation is (if you know it, e.g. Val30Met or V30M):

I would like to receive information from ATTR Amyloidosis Patients' Association about relevant:

News Yes [] Research studies Yes [] Events Yes []

Ways to be involved Yes [] Fundraising initiatives Yes []

I am happy to be contacted by:

Email Yes [] Phone Yes [] Post Yes [] Text message/SMS Yes []

You are free to change your preferences at any time.