

Membership Application Form

Please complete this form and return it to the Anatomical Society's Business Office at the above address. All fields are compulsory except for County/State where it is not applicable.

Title Prof Dr Mr Mrs Ms Miss (please tick)

Surname..... **Forename**.....

Organisation.....

Position.....

Correspondence Address

Organisation Address (if different)

Organisation (if applicable)..... **Organisation (if applicable)**.....

Position (if applicable)..... **Position (if applicable)**.....

Address..... **Address**.....

.....

Postcode/Zip..... **Postcode/Zip**.....

County/State..... **County/State**.....

Contact Telephone..... **Contact Telephone**.....

Email Address..... **Email Address**.....

Reason for joining.....

Please tick if you do NOT wish your contact details to be published in the online membership directory

Please list all University Qualifications

University Name	Country	Award (e.g. BSc, MBBS, PhD)	Year of Award
.....
.....
.....
.....

Please list public honours

Award	Year of Award
.....
.....

For Equal Opportunities Monitoring

Your Date of Birth (dd/mm/yy) .../.../..... Sex: Male/Female (delete as applicable)

Membership Category Applying For

Category	Sterling	Category	Sterling
<input type="checkbox"/> Full Member	£55	<input type="checkbox"/> Senior Member	£10
<input type="checkbox"/> Undergraduate Member	£10	<input type="checkbox"/> Career Break Member	FREE
<input type="checkbox"/> Postgraduate Member	£20	<input type="checkbox"/> Early Career Member	£35

Notes:

- (i) You can join at any time of the year and at any stage of your career. Please note that the membership period runs from 1st October to 30th September.
- (ii) Persons registered for a degree (i.e. undergraduate or postgraduate member category) who wish to apply for this category of membership must ensure that the student member declaration below is completed by their Supervisor or Head of Department to confirm their status.
- (iii) Those applying for Undergraduate, Postgraduate Membership MUST enclose an up to date CV.

THOSE APPLYING FOR FULL MEMBER OR EARLY CAREER MEMBER MUST COMPLETE THE PROPOSER AND SUPPORTING MEMBER DETAILS BOX

Proposer and Supporting Member details (this information will be used to request a reference from your proposer and from a supporting member in order for your application to proceed).

***Your application cannot be considered without these details.**

***Proposer** (a member of the Society):

Name **Position**.....

Email Address **Member Number** (if known)

***Supporting Member** (a member of the Society):

Name **Position**.....

Email Address **Member Number** (if known)

If you are apply for Full membership, please tick as appropriate below:

Academic [] Clinical Academic [] Clinician []

THOSE APPLYING FOR UNDERGRADUATE OR POSTGRADUATE MEMBERSHIP MEMBERSHIP MUST COMPLETE THE STUDENT MEMBER DECLARATION BELOW AND MUST ENCLOSE A CURRENT CV.

*Student Member Declaration applies to both undergraduate/postgraduate students. If you are applying for membership at the reduced subscription rate your Head of Department/Supervisor MUST sign the declaration below to confirm your eligibility (on paper applications only).

***Your application cannot be considered without these details.**

I confirm that the person named overleaf is a non-salaried student and as such is eligible for membership of the Anatomical Society at the reduced rate.

***Name of HOD/Supervisor** (please print)

***Signature of HOD/Supervisor** (paper applications only)

***Email Address of HOD/Supervisor**.....

***Expected Course Completion Date**.....

If you are apply for Postgraduate membership, please tick as appropriate below:

Masters [] Doctorate [] Other []

Interests – please select from the following:

	Teaching Interest	Research Interest		Teaching Interest	Research Interest
Biological/Physical Anthropology			Immunology		
Biomechanics			Medical Education		
Cell Biology			Neuroscience		
Chemical Morphology			Osteoarchaeology		
Clinical Anatomy			Palaeoanthropology		
Comparative Anatomy			Palaeontology		
Dental Anatomy			Pathological Anatomy		
Developmental Biology			Physiology/Biology		
Educational Research			Sports Science		
Embryology			Stem Cells		
Endocrinology			Surgery		
Forensic Anthropology			Tissue Engineering		
Forensic science			Topographical/Gross Anatomy		
Histology			Toxicology		
History of Medicine/Anatomy			Veterinary Anatomy		
Other – please specify					

Note: (v) The Anatomical Society will not pass your email details on to any third party. We may occasionally wish to share your details (excl. email address) with other organisations so that they can contact you regarding products or services which may be of interest. If you do NOT want your details passed on, please tick this box

Payment/Credit Card

I authorise Portland Customer Services to use the payment/credit card details below to pay my membership fees.

Payment/Credit Card Type: Visa/MasterCard/Switch/Maestro (delete as applicable)

Card No..... **Issue No** (if applicable).....

Start Date..... **Expiry Date**.....

Name of Cardholder.....

Signature..... **Date**.....

Cardholder's Address.....

.....

Fees will be taken in £s Sterling at the current exchange rate. Please note that receipts will not be sent unless specifically requested