

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 to correspondence address)

Organisation (if applicable)	Organisation (if applicable)
Position (if applicable)	Position (if applicable)
Address	Address
.....
Postcode/Zip	Postcode/Zip
County/State	County/State
Country	Country
Contact Telephone	Contact Telephone
Fax	Fax
E-mail Address	E-mail Address

Reason for joining

- Please tick if you do NOT wish your contact details to be published in the online membership directory
- Please tick if you do NOT wish to receive e-mails from the Society

Please list all University Qualifications

University Name	Country	Award (ie BSc., PhD)	Year of Award
.....
.....
.....
.....

Please list public honours

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

For Equal Opportunities Monitoring

Your Date of Birth (dd/mm/yy) / / Gender 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"/> Fellow of the Society	FREE
<input type="checkbox"/> Young Academic Member	£35	<input type="checkbox"/> Society Research Student Membership	FREE

Optional Journal Subscriptions

- Print subscription to Journal of Anatomy UK/EUR £224/ROW £226 Print and electronic subscription to Aging Cell £71
- Electronic access to Journal of Anatomy FREE Electronic access to Aging Cell £50

Total

Notes:

- (i) You can join at anytime 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) As a Fellow of the Society or Society Research Student, print subscription to Journal of Anatomy is free.
- (iv) Those applying for Undergraduate, Postgraduate or Society Research Student Membership MUST enclose an up to date CV.

THOSE APPLYING FOR FULL MEMBER OR YOUNG ACADEMIC 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** (an active member of the Society).....

Name..... **Position**.....

E-mail Address..... **Member Number** (if known).....

***Supporting Member** (an active member of the Society).....

Name..... **Position**.....

E-mail Address..... **Member Number** (if known).....

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

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

***Signature of Head of Department/Supervisor** (on paper applications only).....

***E-mail Address of Head of Department/Supervisor**.....

Interests - Research (please tick a maximum of 3 from the following list):

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> biomechanics | <input type="checkbox"/> cell biology | <input type="checkbox"/> chemical morphology | <input type="checkbox"/> clinical anatomy |
| <input type="checkbox"/> comparative anatomy | <input type="checkbox"/> dental anatomy | <input type="checkbox"/> developmental biology | <input type="checkbox"/> educational research |
| <input type="checkbox"/> endocrinology | <input type="checkbox"/> forensic anthropology | <input type="checkbox"/> histology | <input type="checkbox"/> history of medicine/anatomy |
| <input type="checkbox"/> immunology | <input type="checkbox"/> medical education | <input type="checkbox"/> neuroanatomy | <input type="checkbox"/> osteoarchaeology |
| <input type="checkbox"/> palaeoanthropology | <input type="checkbox"/> palaeontology | <input type="checkbox"/> pathological anatomy | <input type="checkbox"/> physical anthropology |
| <input type="checkbox"/> radiological anatomy | <input type="checkbox"/> reproductive physiology/biology | <input type="checkbox"/> sports science | <input type="checkbox"/> stem cells |
| <input type="checkbox"/> tissue engineering | <input type="checkbox"/> topographical/gross anatomy | <input type="checkbox"/> toxicology | <input type="checkbox"/> veterinary anatomy |

Interests - Teaching (please tick a maximum of 3 from the following list):

- | | | | |
|--|--|--|---|
| <input type="checkbox"/> anthropology | <input type="checkbox"/> biomechanics | <input type="checkbox"/> cell biology | <input type="checkbox"/> chemical morphology |
| <input type="checkbox"/> clinical anatomy | <input type="checkbox"/> comparative anatomy | <input type="checkbox"/> developmental biology | <input type="checkbox"/> educational research |
| <input type="checkbox"/> embryology | <input type="checkbox"/> endocrinology | <input type="checkbox"/> forensic anthropology | <input type="checkbox"/> histology |
| <input type="checkbox"/> history of medicine/anatomy | <input type="checkbox"/> immunology | <input type="checkbox"/> medical education | <input type="checkbox"/> neuroanatomy |
| <input type="checkbox"/> osteoarchaeology | <input type="checkbox"/> palaeoanthropology | <input type="checkbox"/> palaeontology | <input type="checkbox"/> radiological anatomy |
| <input type="checkbox"/> reproductive physiology/biology | <input type="checkbox"/> sports science | <input type="checkbox"/> stem cells | <input type="checkbox"/> surgery |
| <input type="checkbox"/> tissue engineering | <input type="checkbox"/> topographical/gross anatomy | <input type="checkbox"/> toxicology | |

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 METHODS

Payment by cheque/postal order is attached. Cheques should be made payable to **Portland Customer Services**.

Payment made by bank transfer to:

**Portland Customer Services, National Westminster Bank plc, 25 High Street, Colchester CO1 1DG, UK.
Account no. 01863630 Sort Code: 60-06-06.**

To facilitate identification please confirm:

Your transfer reference **Date of transaction**

Amount..... **Bank from which it is coming**

I authorise Portland Customer Services to use the credit card details below to pay my membership fees when they become due annually. I wish to pay the above amount by credit card. Credit card Type: Visa / Mastercard / Debit / Switch.

Card No **Issue No**

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

Name of Cardholder

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

Address of Cardholder if different

.....

.....

Postcode/Zip..... **County/State**.....

Country

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