

2010 – 2011

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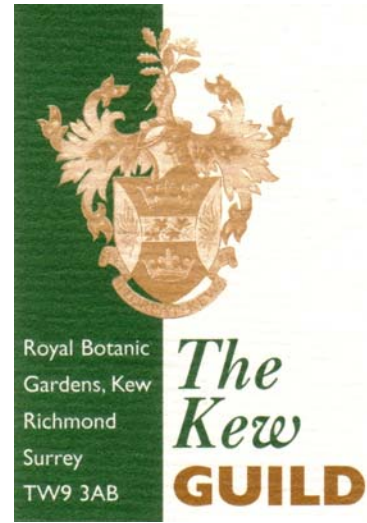
Please reply to:

Membership Application Form

Type	Please indicate
Associate member	
Honorary Fellow	
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Please return this form, completed in black ink and block capitals to:-

Judy Hancock
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Current membership rates on Standing order form	
Surname:	
Title: Dr. Mr. Mrs. Ms.	Forenames:
Date of birth:	Nationality:
Years at Kew:	to
Permanent address:	
Post code:	
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Telephone home:	work:
mobile:	Fax. number:
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Present position:	
Department: (if currently at Kew)	
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Tick here if you wish your qualifications to be included in the Journal	
Membership of professional organisations:	
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I agree to my email address being used to contact me YES...NO.....	
I agree to my name and address being published in the Kew Guild Journal. YES.....NO.....	
Signature:	Date:
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For office use only.

Date received.....date application accepted

Date certificate issuedcertificate numberMembership number.....