the ENGENIUM SOCIETY ASSOCIATE MEMBERSHIP 2015

83 Ducie Street, Manchester, M1 2JQ Email: engenium@engenium.org

APPLICATION FOR ASSOCIATE MEMBERSHIP REGISTRATION

Please complete this form in block capitals using black ink	
1. Surname	Title (Mr/Mrs/Ms/Dr/Prof)
2. Forename(s)	
3. Date of birth	4. Nationality
Address for Correspondence:	
5. Private Address	6. Employer Address or University/College (if applicable - may be left blank)
7. Tel. No	Tel. No
8. Email	Email
APPLICANT's DECLARATION: I, the undersigned, apply to be admitted to the register of the Engenium Society as an ASSOCIATE MEMBER, and certify that the particulars and information on this form are accurate. I undertake to pay the annual subscription until I resign from the society as an Associate Member.	
Signed	Date