

Membership Registration Form Please print off and complete the following in CAPITAL LETTERS:

Surname	(please circle as appropriate)
	Post Code
Telephone (inc local code)	email address
I am paying by Standing Order	I am paying by Cheque .
Please ind	icate your method of payment.
•	n renewal due on 1st September each year
<u> </u>	convenient to pay your membership by anding Order.
	g Order, which you can cancel at any time. der form below and send or take to your Bank.
Don't forget to send your complete	d membership form to the address shown below
and sent to the Treasurer 1 S	uld be made payable to ME Derbyshire South Drive, Chellaston, Derby DE73 1RT. send cash through the post
quarterly newsletters, information but monthly meetings, access to MED's	information pack and your membership card, alletins and updates, a warm welcome at our biscontact line and the use of MED's extensive ME Library.

If you have any further queries before sending off your completed form, please contact John, our Secretary on **01332 864120**

Thank you!

	Bank		by DE24 9HX Branch Title (not address)			Sorting Code Number
pay	HSBC		Victory Road			40 - 19 - 37
	Beneficiary's Name			Account Number	Quoting	Reference
of ME DERBYSH			RE 7 1 4 3 5 6 1 2		1 2	
	Amount Amount in words					
n of	£ 7 - 00 SEVEN POUNDS					
ncing	Date of first payment	and thereafter every	Due date and frequency	until Date of las	t payment	and debit my/our account accordingly
ature(s)						Date
	cline to accept instructio		ng Orders to certain types of	account other than Cur	rent Accounts	Date