Application for UACES Membership

This form should be completed by those wishing to join UACES as an Individual Member - your membership will expire on 31st December of this year. You will be sent an invoice towards the end of the year, at which point you can renew your membership for the following year, or cancel your membership.

Joining in January, February, March or April ONLY

Last Name: ..... First Name: ..... Title (eg Prof, Dr, Mr, Mrs): .....

Institution (University or Organisation): .....

Department / Faculty: .....

Institution Postal Address: .....

..... Postcode: .....

Institution Website Address: .....

Work Telephone No: ..... Work Fax No: .....

Home Telephone No: ..... Home Fax No: .....

Mobile Telephone No: .....

Email Address: .....

Alternate Email Address: .....

Please complete the appropriate details on this form and return by post to:

UACES
School of Public Policy
University College London
29-30 Tavistock Square
London WC1H 9QU
United Kingdom

Address for correspondence if different from Institution address above: .....

..... Postcode: .....

Where did you hear about UACES? .....

Would you like to join the UACES Members Email List? ☐ Yes ☐ No

TO PAY BY CHEQUE

Please make cheque for £40.00, payable to 'UACES'.

We can accept cheques in pounds sterling which are drawn on a UK bank, where the six digit sort-code and eight digit account number have been pre-printed on the cheque.

TO PAY BY CREDIT / DEBIT CARD

I wish to pay my membership subscription of £40.00 by (mark appropriate box):

☐ Visa ☐ Mastercard ☐ Switch/Maestro ☐ Eurocard ☐ Solo

Card No. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Expiry Date ☐☐☐☐ Security No.* ☐☐☐ Start Date** ☐☐☐☐ Issue No.** ☐☐

* Appears on the reverse side of the card on the signature strip

** Usually required for Switch/Maestro and Solo card payments

Cardholder's Name: .....

Cardholders Full Address: .....

Signature of Cardholder: ..... Date: .....

If paying by card, this form can be returned by fax to +44 20 7679 4973 (as an alternative to post)