

Student Membership Application Form



Section 1: About you

Source Code

For office use only

Title (Mr, Mrs, etc)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Surname	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Forenames (in full)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Address for correspondence	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	<input type="text"/>	<input type="text"/>	Postcode	<input type="text"/>
Home tel. no.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mobile tel. no.	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Home/work email address (Delete as appropriate. Please print clearly.)	<input type="text"/>			
Please tick how you would prefer to receive correspondence: Email <input type="checkbox"/> Post <input type="checkbox"/>				Date of birth
				<input type="text" value="D"/>
				<input type="text" value="D"/>
				<input type="text" value="M"/>
				<input type="text" value="M"/>
				<input type="text" value="Y"/>
				<input type="text" value="Y"/>

RCN privacy statement

We like to keep you informed about services, campaigns, events, publications and new initiatives. It is also important for us to find out your views on a range of issues. This may be by post, telephone or electronic mail. Should you not want us to do this, please tick this box.

Please tick this box if you would like to be informed by post or email of favourable rates on a variety of externally provided services.

Equal opportunities

The Royal College of Nursing believes strongly in equal opportunities. In order to ensure that our services are meeting the needs of every one of our members, we would ask you to choose the following ethnic group that best describes you. This information will be treated in the strictest confidence and will only be used to evaluate membership trends:

WHITE	<input type="checkbox"/> White British (11)	<input type="checkbox"/> White Irish (10)	<input type="checkbox"/> White any other background (12)
BLACK OR BLACK BRITISH	<input type="checkbox"/> Black African (3)	<input type="checkbox"/> Black Caribbean (2)	<input type="checkbox"/> Black, Black British (19)
	<input type="checkbox"/> Black other (4)	<input type="checkbox"/> Any other group (9)	
ASIAN OR ASIAN BRITISH	<input type="checkbox"/> Asian Bangladeshi (7)	<input type="checkbox"/> Asian India (5)	<input type="checkbox"/> Asian Pakistani (6)
	<input type="checkbox"/> Asian any other background (17)	<input type="checkbox"/> Chinese (8)	<input type="checkbox"/> Arab (20)
MIXED	<input type="checkbox"/> Mixed White and Black Caribbean (13)	<input type="checkbox"/> Mixed White and Black African (14)	
	<input type="checkbox"/> Mixed White and Asian (15)	<input type="checkbox"/> Mixed any other background (16)	

Method of payment

Please complete either A, B or C

A. Payment by annual/monthly Direct Debit



Please fill in the whole form using a ball point pen and send it to:

Royal College of Nursing, Copse Walk
Cardiff Gate Business Park, Cardiff CF23 8XG

Name(s) of account holder(s)

Bank/building society account number

Branch sort code

Name and full postal address of your bank or building society

To: the Manager	Bank/Building Society
<hr/>	
Address	
<hr/>	
<hr/>	
Postcode	

Instruction to your bank or building society to pay by Direct Debit

Service user number

Reference

Instruction to your bank or building society

Please pay the Royal College of Nursing Direct Debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with the Royal College of Nursing and, if so, details will be passed electronically to my bank/building society.

Signature(s)

Date

Banks and building societies may not accept Direct Debit Instructions for some types of account.

DD11

This Guarantee should be detached and retained by the payer



The Direct Debit Guarantee



- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits
- If there are any changes to the amount, date or frequency of your Direct Debit the Royal College of Nursing will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request the Royal College of Nursing to collect a payment, confirmation of the amount and date will be given to you at the time of the request
- If an error is made in the payment of your Direct Debit, by the Royal College of Nursing or your bank or building society you are entitled to a full and immediate refund of the amount paid from your bank or building society
 - If you receive a refund you are not entitled to, you must pay it back when the Royal College of Nursing asks you to
- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.

