



North of England Veterinary Association

www.neva.org.uk

Application for Membership

Date of application: _____

Title: Mr/Mrs/Miss/Ms/Dr Name: _____ Quals: _____

Address for correspondence: _____

Post Code: _____ Daytime Phone No. _____

Place of work, if different from above: _____

Email address: _____

Tick box if you would like us to email you with reminders about meetings and occasional requests for feedback on topical issues.

Proposer

Name: _____

Address: _____

Signature: _____

Secunder

Name: _____

Address: _____

Signature: _____

Declaration

I wish my name to go forward for election to membership of the North of England Veterinary Association at the next General Meeting, and enclose my first year's subscription of £5.

I understand that as a member of the Association it is my responsibility to ensure that my subscription is paid each year, to let the Secretaries know if my address should change at any time, and to tender formal resignation if at any time I should wish no longer to be a member for any reason.

Signature of applicant: _____

**Please return this form to Honorary Secretary Miss Christine Shield
Station Bungalow, Main Rd, Stocksfield, Northumberland, NE43 7HJ.**