



SRI LANKAN MEDICAL & DENTAL ASSOCIATION IN THE UK

MEMBERSHIP FORM

Return to Treasurer: Dr Mahadeva Manohar, 1 Augusta Oaks, Grimsby, DN34 4UG

I wish to enrol as a member of the Sri Lankan Medical & Dental Association in the UK. I undertake to abide by the rules and regulations of the Association. (Constitution available on website: srilankan-mds.org.uk)

Signature of Applicant.....

Surname ..... First name .....

Initials .....GMC/GDC Number .....

CONTACT DETAILS

Home/Permanent Address

Work/Business Address

E-mail:

E-mail:

Telephone:

Telephone:

Mobile:

Mobile:

For Office use ONLY

Gift Aid Y/N

Database entered Y/N

Date :

Signature:

BANKERS STANDING ORDER

BANK:

ADDRESS:

Please Pay: Lloyds TSB bank PLC, University Of Birmingham Branch, 142, Edgbaston Park Road, Birmingham, B15 2 TY. To the account of Sri Lankan Medical & Dental Association in the UK Account Number 00686216 (Sort code 30-19-14) the sum of thirty pounds (£30.00) immediately and thereafter annually on the first day of January / July commencing 20\_\_ until further notice. This cancels any existing standing orders to SLMDA.

Name of account:

Account number:

Signature:

Sort code: - -

Date: