



# APPLICATION FOR INDIVIDUAL MEMBERSHIP OF THE LABORATORY ANIMAL SCIENCE ASSOCIATION

Please write in BLOCK CAPITALS

### Details of Applicant:

Name and title: .....

Position Held: .....

Address: (Inc. Company) .....

Postcode: .....

Telephone Number: .....

Fax Number: .....

E-mail Address: .....

### Level of Membership:

Individual Membership: £53.00

Laboratory Animals Journal (optional) £53.00

Student members should complete the following statement

I am registered as a full-time student from (date)..... until (date).....

My course of study is: .....

At: .....

### Declaration by the Proposer

Proposed by (Please print): .....

Post/Occupation of proposer: .....

Signature of proposer: .....

Date: .....

Declaration on behalf of: .....

I wish to become a member of the Laboratory Animal Science Association

I agree with its aims and undertake, if elected, to abide by its Bylaws

Signed: .....

Date: .....

Please complete this box to assist in completion of formalities

Please attach a short paragraph in support of this application if your application is not endorsed by a member of LASA.

All forms should be returned to: LASA, PO Box 524, Hull, HU9 9HE

Telephone: 08456 711956 E-mail: [info@lasa.co.uk](mailto:info@lasa.co.uk)