

**MEMBERSHIP APPLICATION FORM**

NAME .....MR/MRS/MISS/MS

ADDRESS .....

..... POST CODE .....

EMAIL ADDRESS .....

CONTACT NO ..... GDC NO: .....

Annual Full Membership:	£70.00
Newly Qualified Dental Therapist :	£35.00( for the first year)
Dental Therapist no longer on GDC Register:	£35.00
Associate Member:	£70.00
Overseas Member:	£70.00

I am a new member ( )

Renewing my membership ( )

Associate member ( )

( please circle)

Dental Hygienist/Dental Nurse/Dentist/Dental Technician/Clinical Technician/Orthodontic Therapist

I wish to be allocated the following region:

Scotland ( ) North East ( ) North West ( ) Midlands ( ) East Anglia( ) London ( )  
South West ( ) South Wales ( ) Ireland ( )

I would like a membership badge ( ) Badges cost £5.00

I enclose a cheque for £..... made payable to BADT

Signature .....

Date .....

Please send to:

Anne Connor  
52 Lenton Grove  
Hopwood  
Heywood  
CL10 2LR

<b>For Official Use Only</b>
Cheque ( ) World Pay( ) Database ( )
New Members Pack/Constitution ( )
Who's Who ( )
Membership Card ( )
Membership No: .....