

**BACPR-BCS JOINT MEMBERSHIP APPLICATION FORM**

BACPR members are able to benefit from a special discounted BCS membership rate. To take up this offer with the BCS please complete the following BACPR-BCS joint membership application and Direct Debit\* forms. Please return these to the British Cardiovascular Society, 9 Fitzroy Square, London W1T 5HW.


\* No other payment methods are accepted for this special offer.

***Please complete in capital letters and black ink. All fields marked with an \* are mandatory***

*Title and full name:												
Job Title:												
*Please circle your profession:												
<table style="width: 100%; border: none;"> <tr> <td style="width: 25%;">Nurse</td> <td style="width: 25%;">Physiotherapist</td> <td style="width: 25%;">Exercise Physiologist</td> <td style="width: 25%;">Research/Academic</td> </tr> <tr> <td>Doctor</td> <td>Psychologist</td> <td>Occupational Therapist</td> <td>Dietitian</td> </tr> <tr> <td>BACPR Exercise Instructor Network</td> <td>Other Exercise Professional</td> <td colspan="2">Other (please state) _____</td> </tr> </table>	Nurse	Physiotherapist	Exercise Physiologist	Research/Academic	Doctor	Psychologist	Occupational Therapist	Dietitian	BACPR Exercise Instructor Network	Other Exercise Professional	Other (please state) _____	
Nurse	Physiotherapist	Exercise Physiologist	Research/Academic									
Doctor	Psychologist	Occupational Therapist	Dietitian									
BACPR Exercise Instructor Network	Other Exercise Professional	Other (please state) _____										
The <b>BACPR Exercise Professionals Group</b> (BACPR-EPG) represents exercise professionals working in cardiovascular prevention and rehabilitation and is made up of ACPICR members, BASES members and the BACPR Exercise Instructor Network. Please tick for your details to be forwarded to the BACPR-EPG <input type="checkbox"/>												
*Work/Hospital name and address:												
*Correspondence address, including postcode (if different from the above):												
*Daytime telephone number(s):												
*Email address:												
Alternative email address:												
<b>NEW MEMBERS ONLY: How did you hear of us? flyer/ advert / word of mouth /publicity stand / other:</b>												

BCS-BACPR Joint Membership fee for non-medical consultants is £105.

BCS-BACPR Joint Membership fee for medical consultants is £305.

 Do you wish to receive paper copy of Heart at the members' rate of an additional £80 per annum?  YES/  NO

*I certify that the information provided in this membership application is correct. I agree to abide by the Rules and Articles of Association of the BACPR (these can be viewed in the 'Membership' section of [www.bacpr.com](http://www.bacpr.com)) and the BCS membership rules ([www.bcs.com](http://www.bcs.com))*

Signature of applicant.....Date.....

Please note that by joining BCS you agree to the processing, storage and use of the details you have provided for the purpose of managing your subscription. We will use the details you have shared with us to:

- contact you regarding essential information related to your membership subscription.
- provide you with essential information about the Society's activities, elections, AGM, events, courses and news.
- your details will be shared with and processed by BMJ, the American College of Cardiology, Oxford University Press and the European Society of Cardiology, so that they are able to send you and provide you with online access to Heart journal, the Journal of the American College of Cardiology, CardioSource, the ESC handbook and ESC membership.

We will NOT without your consent share your contact details with other individuals or organisations.

We usually contact members by email unless we have not valid address for you, in which case we may contact you by phone or by post. If you wish to unsubscribe from our email list, you may do so at any time by contacting us on [admin email] or by clicking the link included in our emails; please note that this may prevent you from accessing some or all of the benefits associated with your membership of our Society.

The Society accepts credit card payment from members for payment of their first membership subscription and subsequent payment will be automatically collected by Direct Debit once a year in June. To pay by credit card, please post or fax the Society (+ 44 207 388 0903) the following details:

PLEASE NOTE WE ARE NOT ABLE TO ACCEPT AMERICAN EXPRESS.

**Credit Card Type:** VISA / MASTERCARD / MAESTRO / JCB

**Credit Card Number:** \_\_\_\_\_

**Security Code:** \_\_\_\_\_  
(last 3 digits on the back of the card above the signature)

**Valid from:** (Month/Year) \_\_\_\_\_

**Expiry date:** (Month/Year) \_\_\_\_\_

**Issue number** (if applicable): \_\_\_\_\_

**Card Holder Details – PLEASE COMPLETE BELOW**

**Name as appears on the card:** \_\_\_\_\_

**Billing address:**

- \*Address 1
- Address 2
- Address 3
- \* Town/City
- Region
- Postcode/ZIP code
- \* Country
- \* Email

Please deduct the amount(s) below from the above credit card

Membership Subscription: £.....

Paper Heart Subscription: (if applicable) £.....

Total: £..... (Please enter amount owed)

\_\_\_\_\_  
Signature



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

Instruction to your Bank or Building Society to pay by Direct Debit

British Cardiovascular Society 9 Fitzroy Square London W1T 5HW
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Originator's Identification Number

9	1	0	4	8	2
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Reference Number (to be completed by BCS)

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Name(s) of Account Holder(s)


Bank / Building Society account number

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Branch Sort Code

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Name and full postal address of your Bank or Building Society

To: The Manager
Bank/Building Society Name
Address
Postcode

Full name in capital letters

Signature(s)

Date


Banks and Building Societies may not accept Direct Debit Instructions for some types of account



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 British Cardiovascular Society will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request the British Cardiovascular Society 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 British Cardiovascular Society 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 British Cardiovascular Society 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