

The Royal London Hospital League of Nurses

Application form

I hereby apply to become a member of The Royal London Hospital League of Nurses. I enclose the completed Bankers standing order for the annual subscription or a cheque for £10 for my first year's subscription.

Surname: Mr, Mrs, Miss, Ms, other title:

Forenames (in full):

Maiden name (if applicable):

Permanent address:

Email address:

Training School/College

Date Training Commenced:

Date Training completed:

NMC PIN:

Date of registration of initial nursing qualification:

Present position:

Work address:

The League publishes a membership list, which is circulated to members both in and outside the EEC. Please tick the box if you do NOT wish your details to be included in membership lists

Signature:

Date:

Standing Order Mandate

Please fill in the whole form and send it with your application to:

Honorary Treasurer
The Royal London Hospital League of Nurses
c/o The Post Room
The Royal London Hospital
Whitechapel
London E1 1BB

To: The Manager

Name of your Bank:

Postal address:

Postcode:

Name(s) of account holder(s)

Account number:

Sort Code:

Please pay Coutts & Co, Strand Branch.

Sorting Code No. 18-00-02

For the credit of: The Royal London Hospital League of Nurses General Fund
Account, Number 35582230

The sum of £..... (write amount in figures)

..... (write amount in words)

Commencing on (write date of first payment) and thereafter
every year.

Signature:

Date: