



## British Society for Surgery of the Hand

### APPLICATION FOR COMPANION MEMBERSHIP

<b>Surname</b>	
<b>Forenames (in full):</b>	
<b>Title:</b>	<b>Male/Female:</b>
<b>Nationality:</b>	
<b>Date of Birth:</b>	

<b>Addresses</b>	
<b>Home:</b>	<b>Hospital:</b>
E-mail:	E-mail:
Telephone (incl. STD code):	Telephone (incl. STD code):
Fax No:	Fax No:
Correspondence Address? ( <i>circle only one</i> )	Home / Hospital

<b>Qualifications (with dates and awarding bodies):</b>

<b>Location and Title of Current Post:</b>

**Previous Posts Held** (including name of Hospital):

**Experience in Work Related to Hand Surgery** (including any Publications):

**Signature of Applicant:**

<b>Sponsors</b>	
<b>Proposer:</b>	<b>Signature:</b>
<b>Secunder:</b>	<b>Signature:</b>

**Any further Information:**

**DATA PROTECTION ACT:**

The Society mailing list will be held in accordance with the Data Protection Act 1998. It will be available to all Royal Surgical Colleges, relevant Specialist Associations and any other bodies who may be running appropriate conferences, courses or clinical research projects. This is only for the organisational activity of the B.S.S.H. and will always be in the legitimate interest of the membership. Any request for a mailing list from one of these bodies will be assessed, and only where it is appropriate will any information be divulged. At no time will any data be disclosed for commercial purposes.

I consent to my records being held in this manner to be released in accordance with this statement.

Signed \_\_\_\_\_ Date \_\_\_\_\_

**Rules of Membership:**

Companion Members shall be colleagues from allied non-medical disciplines who have a particular interest in hand surgery. They will have no voting rights. Applications for inclusion in this category should be made in writing to the Honorary Secretary.

Please indicate below, the **TYPE OF MEMBERSHIP REQUIRED**. Your membership **will not** include a subscription to the Journal of Hand Surgery if you do not indicate a preference:

either:

a. with subscription to Journal of Hand Surgery (European Volume)

or:

b. without subscription to Journal of Hand Surgery

**Election of Members:**

Candidates for Membership shall be sponsored by two Members of the Society. Their names shall be sent to the Honorary Secretary for consideration by the Council. The names of those deemed suitable shall be submitted to a General Meeting for election. If a poll is demanded a majority of two-thirds of those Members present shall be required.

**A Curriculum Vitae should be submitted with this application form.**

**Sponsors should be Members of the British Society for Surgery of the Hand.**

**THIS FORM SHOULD BE COMPLETED AND RETURNED TO THE HONORARY SECRETARY WITH A COPY OF YOUR CURRICULUM VITAE:**

The Honorary Secretary  
British Society for Surgery of the Hand  
at The Royal College of Surgeons  
35-43 Lincoln's Inn Fields  
London WC2A 3PE

Tel: 020 7831 5162  
Fax: 020 7831 4041