**BGPERT New Members Pro-Rata Membership Form**

We are always pleased to welcome new members to BGPERT throughout the year.

The pro-rata membership fees are listed below, please complete and return this form after transferring your payment to the account detailed below.

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| **New members when joining in;** | **GPs** | **Nurse Practitioner, Physician Associate, Paramedic & Clinical Pharmacist** |
| April, May or June | As above | As above |
| July, August or September | £172.50 | £150.00 |
| October, November or December | £115.00 | £100.00 |
| January, February or March | £57.50 | £50.00 |

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| **YOUR DETAILS:** |
| Name & title |  |
| Telephone number |   |
| GMC/NMC number |  |
| Surgery & address |  |
| Email address |  |
| Please include an email address as we send **all** correspondence via email |
| Role | [ ]  Partner [ ]  Sessional GP [ ]  Locum [ ]  Nurse Practitioner [ ]  Retired GP [ ]  GPST [ ]  Physician Associate [ ]  Paramedic [ ]  Clinical Pharmacist [ ]  Other |
| Area | [ ]  BANES [ ]  Somerset [ ]  Wiltshire [ ]  Bristol [ ]  Other  |

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| **ACCOUNT DETAILS:**  |
| **Payable to:** | Barclays Bank |
| **Bank:** | 4 Southgate Street |
| **Bank address:** | Bath, BA1 1AQ |
| **Sort code:** | 20-05-06 |
| **Account Number:** | 90531901 |