

MEMBERSHIP APPLICATION FORM - 2010/2011

www.northantsdyslexia.co.uk

I/We wish to become a member of Northamptonshire Dyslexia Association and enclose a cheque for £15.00 Individual Membership or £20.00 for Corporate Membership & Listed Tutors.

Name (Mr/Mrs/Miss/Ms) _____

Address: _____

Post Code: _____

Tel.No. _____ E.Mail _____

I/We would like to support the Northamptonshire Dyslexia Association by: -

Fundraising Joining the Committee Administration

Producing/writing articles for newsletter/website

Joining as a qualified specialist tutor and being entered on the NDA Register of Tutors

Making a donation of £ _____

I am interested in joining an ADULT SUPPORT GROUP / a PARENT SUPPORT GROUP

Data Protection

The information you provide on this form will be entered on the NDA's database and used to process your membership. Please sign and date the box below to indicate your consent for us to hold your personal information & agreement to electronic communication..

Signed: _____	Date: _____
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Dual NDA / BDA membership

I give my permission for my details to be passed to the British Dyslexia Association to sign me up as an Individual Member of that organisation, making me a dual NDA/BDA member.

Signed: _____	Date: _____
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Please return this completed form, membership fee & any comments to:-

The Membership Secretary
 Northamptonshire Dyslexia Association
 PO Box 339
 NORTHAMPTON
 NN3 7WY

Cheques should be made payable to Northamptonshire Dyslexia Association