



# Associate Membership Application

Associate Membership of the ISM is for those who are not necessarily musically qualified but who wish to help, and be helped by the Society

1 **Name** (for publication)

**Title** (Mr/Mrs/Miss/Ms/Other)

**Honours and awards** (eg OBE)

**Date of Birth**

**Address** (for correspondence)

**Postcode**

**Tel / Fax / Email**

2 **Qualifications by examination** (musical or non-musical qualifications, awards and courses studied)(we retain the right to ask for evidence)

Letters

Conferring body

Principal subject

Date awarded

3 **Other details** (if you have no formal qualifications, give brief details of any other training or courses)

Letters

Conferring body

Principal subject

Date

4 **Occupational details**

Main professional occupation and current appointments

5 **Current musical activities**

6 **Other relevant experience**

7 'I declare that the above statements are true to the best of my knowledge and belief. If elected, I agree to abide by the rules of the Society in force for the time being. I authorise the Society to use such non-confidential information as it holds in respect of me as it may think fit.'

Signed

Date

8 If you are a member of any other professional associations, or of any trade unions, please list them here

9 Please tell us how you heard about the ISM, and why you would like to join

10 You should now send this completed form and your registration fee of £15 (cheques payable to 'ISM') to:  
Neil Hoyle, Chief Executive, ISM, 10 Stratford Place, London W1C 1AA .