

The British Academy of Forensic Sciences



MEMBERSHIP APPLICATION FORM (please reply to Dr D Syndercombe Court by post or e-mail)
Please confirm in the website box which, if any, of your details we may use on our website.
This information will reach the public domain)

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|--|--------------------------|----------------|----------------|
| Forenames | Surname | Website | |
| Present occupation / post | Qualifications / Honours | | |
| Address (home) | Address (professional) | Website | |
| Address for correspondence (please indicate)? | Home | Professional | |
| Address for publication/website (please indicate)? | Home | Professional | |
| Telephone (home) | Telephone (office) | Website | |
| Email | Website | Fax (office) | Website |
| Category of Membership Desired? | A: Full | B: Associate | C: Student |

DATA PROTECTION ACT

Should I be invited to become a member, I consent to the details in this application from being held on a computer database and being published in such form as the Association considers appropriate for the benefit of the membership. I consent to the details being transferred to countries or territories outside the European Economic Area for the purpose of publication of members' details on the Internet. I understand that I may withdraw this consent by giving notice to BAFS at any time.

NAMES AND ADDRESSES OF TWO MEMBERS OF THE BRITISH ACADEMY OF FORENSIC SCIENCES WILLING TO ACT AS REFEREES, OR PLEASE FORWARD A SHORT CV WITH NAMES OF TWO PROFESSIONAL REFEREES

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| PARTICULARS OF FORENSIC INTEREST AND EXPERIENCE |
| PARTICULARS OF COURSE OF STUDY AND DATES (STUDENT APPLICATIONS ONLY) |
| Do you consider your discipline predominantly either (please indicate one)? 1 Medical 2 Science 3 Law 4 Police 5 Other forensic |
| Please describe your background, interests, qualifications in forensic medicine, science or the law for an entry on the web site (strictly maximum 15 words only) |

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