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Type of Application

Join   
Renew

2

Membership Category

Consumer   
Researcher/Educator   
Health Care Professional   
Industry

3

How would you like to describe your interests on the NHSF Website?

4

Organisation/Individual Details

Name   
Contact Person   
Job Title   
Email

5

I approve our application for membership and publication of my interests and my name on the NHSF website

Name	Position	Date
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As of March 2021 membership of the NHSF is free of charge, but in future membership fees may be applied, which will be fully optional.

By completing this membership form, you agree to be contacted by NHSF. Our privacy policy can be found on our website at <https://nathealthscience.org/privacy-policy/>

Please tick this box in case you would NOT like to be part of our mailing list