British and Irish Association of Robotic Gynaecological Surgeons BIARGS- APPLICATION FORM

**If you wish to apply for BIARGS membership, please complete the form and send to**:

Nahid Gul FROCG

BIARGS Treasurer

Consultant Gynaecology Pelvic Robotic & Laparoscopic Surgeon

Northwest

Email: nahidgul@nhs.net

***Admin: PA: biargsbiargs20@gmail.com***

**Subscription rate: £55 for Doctors £30 for nurses/allied specialist, £45 for international members /per annum payable on joining**

*Your details:*

|  |  |
| --- | --- |
| **Name**  |  |
| **Address :** |  |
| **Position** |  |
| **Base Hospital** |  |
| **Email address** |  |
| **Mobile number** |  |

*Payment details: BIARGS account details are*

**Please Pay:**

|  |  |
| --- | --- |
| **Bank Name:** | Barclays Bank PLC |
| **Sort Code:** | 20-97-58 |
| **Account Name:** | BIARGS |
| **Account Number:** | 23086151 |

*DATE OF APPLICATION: ……../………/…………*

*PAYMENT METHOD (please circle) Online/ Standing order/ Cheque*

***DATA PROTECTION ACT DECLARATION***

*I agree to my personal information being placed onto the BIARGS database. We will not pass on your information on to any third party without your express permission.*

*Signature …………………………………………………………… DATE ………..........................................*