

MEMBERSHIP FORM

Alternative & Complementary Healthcare Research Network (ACHRN)

Membership of this network is open to people who have an interest in issues concerning research into alternative and complementary healthcare. The network currently meets 4 times a year in Manchester.

Annual membership subscriptions to cover running costs, including room hire and mailings, are:

£20 (waged)

£10 (unwaged, students)

Cheques should be made payable to: ACHRN

To join, please complete and sign the form below and return it with your payment to the following address: Peggy Welch, c/o IHR Postgraduate Office, University of Lancaster, Bailrigg, Lancaster LA1 4YW.

Full Name: _____

Contact address: _____

_____ Postcode: _____

Daytime telephone number: _____ Fax: _____

Email address: _____

Current occupation/status: _____

Place of work: _____

Please give details of your areas of interest / research in alternative and complementary therapies

What do you hope to gain from the network?

I agree that my details may be held on computer for mailing purposes in line with the Data Protection Act.

I enclose my subscription of £20 / £10 (delete as appropriate)

The network aims to provide links and support among its members. However, if you DO NOT wish your personal details to be shared with other network members, but would still like to receive information from the network, please tick here

Signed: _____ **Date:** _____