



# Membership Application Form

MEMBERSHIP TYPE: individual (£40)  trainee/NQT (£10)  group (£75)

Organisation:  
(group membership only)

## Your details:

Title:

Surname:

First Name:

Current Position:

Place of work:

Contact Address:

Postcode:

Daytime/Evening Phone:

Email:

## Method of Payment

**Cheque:** (made payable to 'ASPE')

(Please send to PO Box address below with your name on the back of the cheque)

**Invoice:**

(Please complete billing address below and return it to [ASPEinfo@aol.co.uk](mailto:ASPEinfo@aol.co.uk) or to the PO Box below)

**Bank Transfer:**

Bank: National Westminster Bank Plc

Sort Code: 60 02 13

Account Number: 51208148

Reference: ASPESub+surname

**BILLING ADDRESS FOR  
INVOICES**

Organisation:

Name:

Address:

Postcode:

Phone:

Email:

Please email this form to the Acting ASPE Membership Secretary at [ASPEinfo@aol.co.uk](mailto:ASPEinfo@aol.co.uk)

You may also send this form by post to the Association for the Study of Primary Education  
at PO Box 308, Cheadle, SK8 9ER