

As a Student Membership you will be set up with one account on the website and you can then enjoy all the BANA member benefits.

Student Member:

Title First Name(s).....Surname.....

Home Address.....

..... Post Code

Tel Email

As a student member you are entitled to free membership however we will require proof that you are in full time education. Please enclose a copy of your registration form for the course that you are currently on.

Any support you can give us by Donations, Fundraising or Volunteering would be much appreciated, please contact us to find out how you can help.

We would be grateful if you could complete this short questionnaire as part of your membership registration which will enable us to send you the magazine and other information according to your preferences.

Being a BANA member you can be assured that we will never share your information with any other business or charity. Our privacy policy is available on our website or you can request a copy from the BANA office.

BANA Member Questionnaire:

Student Member:

I am: An acoustic Neuroma patient Partner Family member Medical Student

Age group: 18-21 22-35 36-45 46-55 56-65 66+

Membership Options:

Receipt of our quarterly magazine *Headline News*.

Link to online copy by email Postal copy

I am willing to support research & complete questionnaires Yes No

I would like to be invited to local area group meetings Yes No

I agree to be contacted by email/letter of BANA's continuing work until I notify you otherwise. Yes No

I was previously a member of BANA Yes No

How did you hear about our charity?

