

BJMA Life Membership Joining Form
(This form is only for students)
Life membership is only £ 100

Title

Surname.... ..

First Name.....

Father's Name.....

Mother's Name.... ..

Address.....

.....

.....

Post Code.....

Telephone/Mobile.....

Fax... ..

Email

Medical School.....

Please send this form to:

Mr Rajesh K Choudhary
3, Flambard Drive,
Bracks Farm
Bishop Auckland, County Durham
DI14 7GG
Tel: 01388 450682