



Overseas Membership Application Form

Names: **Date of Birth**

.....

Address:

.....

Postcode/Zip Code:.....

Country:

Email address*

*Note: The BDHS is building up a email database to simplify circulation of information, including meeting papers, e-newsletters etc.

I wish to apply for membership of the British Deaf History Society as an overseas subscriber at a special rate of **£90 for three years.**

**Please return this form to:
British Deaf History Society
11-13 Wilson Patten Street, Warrington, WA1 1PG England**

Card No: _____

Date of Expiry ___/___/___ Security Code: ___ ___ ___

Signed: _____

Position in Organisation: _____

Date: _____