

Individual membership Renewal form 2019-2020

MUSEUMS
ASSOCIATION

Thank you for supporting the Museums Association over the past 12 months.

If you haven't already done so, please register on our website for your access to Museums Journal and Museum Practice online, as well as up-to-date information about events, jobs, news and projects.

You can also renew your membership online at www.museumsassociation.org.

Personal details

Name _____
 Membership number _____
 Job title _____

 Place of work or study _____

 Address for correspondence _____

 Postcode _____
 Tel _____
 Email _____

UK Individual Fees

| 2019/2020 Grades | Essential member | Student, Retired, Unwaged, Volunteer, Trustee | Full member, Associate, Fellow |
|--------------------------------------|------------------|---|--------------------------------|
| Annual fee (one-off or Direct Debit) | £48 | £60 | £92 |
| Quarterly Direct Debit fee | £12.50 | £15.50 | £23.50 |
| Monthly Direct Debit fee | £4.50 | £5.50 | £8.20 |
| Free entry | | | |
| Membership Card | ✓ | ✓ | ✓ |
| Online support | | | |
| Museums Journal | ✓ | ✓ | ✓ |
| Museum Practice | ✓ | ✓ | ✓ |
| Regular Newsletters | ✓ | ✓ | ✓ |
| Museum Essentials | ✓ | ✓ | ✓ |
| Community | | | |
| Members meeting | ✓ | ✓ | ✓ |
| Member reps | ✓ | ✓ | ✓ |
| Discounts | | | |
| One day events | ✓ | ✓ | ✓ |
| Annual conference | ✓ | ✓ | ✓ |
| Find a Museum | ✓ | ✓ | ✓ |
| Print publications | | | |
| Museums Journal | | ✓ | ✓ |
| Services Directory | | | ✓ |

Select membership

Essential member
 Retired
 Student
 Trustee
 Unwaged
 Volunteer
 Full member, Associate, Fellow

Declaration

Please renew my membership of the Museums Association

Signature _____ Date _____

Payment methods

Please complete one payment method only.
 Please do not send bank details via email. Any bank details sent via email will be deleted.

I enclose a cheque for £ _____ made payable to the Museums Association
 Please charge my Mastercard/Visa £ _____
 Annual Direct Debit
 Quarterly Direct Debit
 Monthly Direct Debit
 I have completed the Direct Debit form below
 Please post the entire form back to the Museums Association

Card number _____
 Expiry date _____
 Card security code _____
 Please send me a receipt



Instruction to your Bank or Building Society to pay by Direct Debit

Name and full postal address of your Bank or Building Society

To: The Manager _____
 Bank/Building Society _____
 Address _____

 Postcode _____
 Name(s) of Account Holder(s) _____

Branch Sort Code

 Bank/Building Society Account Number

Banks and Building Societies may not accept Direct Debit Instructions for some types of account.

Originator's Identification Number

Reference Number _____

Instruction to your Bank or Building Society

Please pay the Museums Association Direct Debits from the account detailed in this Instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this Instruction may remain with the Museums Association and, if so, details will be passed electronically to my Bank/Building Society.

Signature(s) _____
 Date _____

Please return the whole of this form to:
 Museums Association, 42 Clerkenwell Close, London, EC1R 0AZ

