

**CLASS OF MEMBERSHIP & FEES:**

Application fee (FREE)  
Student member (FREE)

**PERSONAL DETAILS:**

(fields marked with \* are compulsory)

Title: Mr  Mrs  Ms  Miss  Other

First name\*:

Surname\*:

Address\*:

Postcode\*:

Tel:

Email\*:

Date of Birth:

**APPRENTICESHIP / ACADEMIC DETAILS:**

Institution:

Course title:

Qualification level/type:

Course start date:

Course end date:

Email:

**HOW DID YOU HEAR ABOUT SOE?**

Please let us know how you heard about SOE and its Professional Sectors below:

Event  Academic Institution  Internet  Friend

Other

**DATA PROTECTION:**

The Society takes the protection of your data very seriously. It will not be divulged, other than under legal obligation, to third parties other than Society approved suppliers who may, from time to time, write to inform you of offers and opportunities agreed with the Society.

If you do not wish to receive any contact from Society approved suppliers please tick the box.

**APPLICANT DECLARATION:**

I agree to uphold the provisions and standards set out at [www.soe.org.uk](http://www.soe.org.uk). By submitting this form I declare that the statements I have made are true and accurate to the best of my knowledge.

Signature:

Date: