ASSOCIATION OF SOUTH WEST MEDIATORS ("ASWM")

Membership Application Form

FULL NAME	

BUSINESS ADDRESS			
		Post Code	

CONTACT DETAILS:	OFFICE	
	HOME	
	MOBILE	
	EMAIL	

PRIMARY PROFESSION	
ACCREDITING BODY	
ACCREDITATION DATE	
Please enclose copies of relevant accreditation certificates. If not accredited, please provide other relevant qualifications or statement of experience	

PANEL MEMBERSHIP	*Please indicate which Panels you wish to join and whether you would be interested in assisting with the running of the Panel.*			
Panel	Civil & Commercial	Family	Workplace	Other – please specify
Membership				
Assist running				

MEMBERSHIP FEE:	(Annual Membership £50 plus £25 joining fee)	**£75.00**
Please attach your cheque for the total amount made out to: "The Association of South West Mediators" or transfer funds directly using sort code 56-00-05 and account No 21240183		

I AGREE TO BE BOUND BY THE ARTICLES OF ASSOCIATION OF ASWM, AND THE PROCEDURES SET OUT IN THE ASWM HANDBOOK, AND AGREE, FOR THE PURPOSE OF THE GENERAL DATA PROTECTION REGULATIONS, THAT ASWM MAY PROCESS INFORMATION ABOUT ME.

SIGNATURE	**DATE**

Please send completed application form to: The Secretary, ASWM, c/o Milsted Langdon, Winchester House, Deane Gate Ave, Taunton TA1 2UH or send by email to enquiries@aswm.org.uk and transfer funds directly.