



The ME Association

Here to support - here to inform - here to fund research

Membership Application Form

UK residents £18 p.a.*

BFPO £18.00 p.a.*

Europe £24.00 p.a.*

Rest of World £30.00 p.a.*

The ME Association offers support and information to everyone with an interest in ME/CFS (myalgic encephalopathy/chronic fatigue syndrome) or PVFS (post-viral fatigue syndrome).

Please see “**10 good reasons for joining The ME Association**” for the benefits of membership and the offers made to new members.

Payment options are listed on page 3. *As well as the subscription charges mentioned above, we offer members who decide to pay by Standing Order the option to pay by instalments as follows: UK and BFPO, £2 per month or £5.00 per quarter.

Please consider the ANNUAL Standing Order option. This will help us to keep our costs down and to put more money into our support and information network. As a ‘thank you’ for your ANNUAL Standing Order, you may – when you join – select free of charge 10 of the £1.00 leaflets from the 8-page MEA Order Form at www.meassociation.org.uk

This offer only applies to ANNUAL Standing Orders.

If you are a UK taxpayer, help us increase the value of your subscription and any donation by completing the Gift Aid declaration, which is also on page 3.

When you have completed the form, please send it with your cheque or postal order (if relevant) to
The ME Association, 7 Apollo Office Court, Radclive Road, Gawcott, Bucks MK18 4DF

Your Personal Details – Please use **BLOCK CAPITALS**

Title.....ForenamesSurname.....

Address

Postcode (Zip)Country

UK telephone numbers: DayEveMob

Email address

The ME Association’s legal constitution is defined by our Articles of Association.

Copies are available on request from The ME Association’s Head Office or via our website.

The Myalgic Encephalopathy Association, 7 Apollo Office Court, Radclive Road, Gawcott, Bucks MK18 4DF.
Registered Charity No. 801279 ● The ME Association is a company limited by guarantee ● Company No. 2361986
The ME Association is registered under the Data Protection Act.

Please be sure to sign the Declaration at the foot of this page

DATA COLLECTION

If you have ME/CFS or PVFS, or are filling in this form on behalf of someone who does, it would help our record-keeping if you will complete the following details.

Our database of people with ME/CFS or PVFS is a useful source of information. Any use within The MEA of details entered below will be totally confidential and, if passed to an external body for research purposes, will be done so anonymously. Your signature in the declaration below indicates acceptance of such use. Please feel at liberty to leave blank any question(s) on this page that you would prefer not to answer.

Do you have ME/CFS or PVFS or are you a Carer?

Gender *male / female*

Date of Birth (day / month / year) / /

Ethnicity *African / Afro-Caribbean / Asian / White / Other*

If your ME/CFS or PVFS allows you to work, occupation now full / part-time

Occupation at the time your ME/CFS or PVFS began..... full / part-time

Year your ME/CFS began

Have you received a positive diagnosis of ME/CFS or PVFS? *yes / no*

Who diagnosed the condition? *GP / consultant / self / other (please state)*.....

If consultant, please state name and hospital

Are you mainly housebound unless someone helps you? *yes / no*

Are you mainly bedbound? *yes / no*

How did you hear about The ME Association?

The MEA's website / internet search / word of mouth / health professional / other charity / other (please state)

DECLARATION

I confirm this application for membership of The ME Association and I agree to the use of the above data in the way described.

Signature **Date**

continued/...

PAYMENT

I wish to pay an annual membership of £18 (UK/BFPO), £24 (Europe), £30 (R o W) £.....

I also wish to (*please tick all that apply*):

- make a donation to The ME Association £.....
- purchase *Living with ME* by Dr Charles Shepherd at £10.50 £.....
- (Book purchase includes p & p) **Total Payment** £.....

Written confirmation and delivery of product(s) / membership received by UK consumer within 30 days from date of purchase.

Cancellation or Return: You have the right to cancel or return product(s) / membership purchased. Notification in writing of cancellation or return should be sent to The MEA within seven days from receipt of product(s) / membership. Postage and packaging of returned goods to be paid by the consumer unless goods found to be faulty on delivery. Refunds will be paid within 30 days. This does not affect your statutory rights.

GIFT AID – UK taxpayers can increase the value of their payments at no additional cost

Please tick this box! I wish The ME Association to reclaim tax on my present and future payments. I pay sufficient Income Tax and Capital Gains Tax to cover the amount The ME Association will reclaim. *If your future tax circumstances change, please be advised that it is your responsibility to let us know.*

PAYMENT METHOD – complete as appropriate. Payments in pounds Sterling, please

- Cheque / Postal Order / International Money Order made payable to The ME Association**
- Debit Card:** Please tick VISA MASTERCARD DELTA MAESTRO/SWITCH
- Card Number
- Valid from Expires end Issue No. (Maestro/Switch only)
- Name on card
- Amount £ Signed Date

- Standing Order.** Paying your membership and / or donations by standing order is an effortless way to maintain your support. By completing the form below, your payment is sent to us at the frequency you decide. **PLEASE MAKE THE START DATE TWO WEEKS FROM THE DATE YOU RETURN THIS FORM TO US**

Standing Order Mandate To (Name of your Bank).....
Address of your Bank.....

Please pay Lloyds Bank plc, 22 Grover Walk, Corringham, Stanford-le-Hope, Essex SS17 0ER (Branch Sort Code 30-18-34, Account Number 00047979) for the credit of The ME Association, annually /quarterly / monthly (delete as appropriate) the sum of (*in words*):

..... pounds, *starting on / / 20.....*

Your Bank Sort Code Your Account Number

Your Name.....

Signature..... Today's Date / / 20.....

MEA Reference to be quoted on all payments (*The ME Association to complete*)