CONSENT FORM FOR COMPANY MEMBERSHIP OF

Sands (Stillbirth and Neonatal Death Society)

Company Number 2212082

	Please complete in Black and in CAPITALS FULL NAME OF PERSON																															
	Title				IN																											
	First Name]
	Surname]
	FULL POSTAL	. A[)DF	RES	S																											
	House Name	or	No																													
	Street]
	Town/City																															
	County																															
	Post Code]																					
	Country		\perp]
	Date of Birth																															
	Consent																															
1.	I agree to become a Company Member of Sands (Stillbirth and Neonatal Death Society) ("the Company") on the terms of the Memorandum and Articles of Association of the Company from time to time in force.																															
2.	I undertake that if the Company is wound up whilst I am a Company Member or within one year after I cease to be a Company Member, I will contribute up to £1 towards the winding up costs and any liabilities of the Company which were contracted whilst I was a Company Member.																															
3.	I do/do not [Sands via e-m		te a	s aļ	plic	ab	le]	cc	n:	sei	nt	to	re	ce	i∨€	e i	nfo	orr	na	tic	n	ar	d	d	oc	ur	ne	nt	s f	ro	m	
	SIGNED			_																												_
	Name (Please	Pr	int)) _																												_
	Date			_																												-
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Please complete and return to:-

The Company Secretary of Sands (Stillbirth and Neonatal Death Society) at 3rd Floor 28 Portland Place London W1B 1LY