



HASSRA East Midlands

Associate Membership application form

HASSRA East Midlands Associate Membership is available to anyone within the East Midlands Region who has taken early severance from the Dept of Health or Dept for Work & Pensions

Or

Have been a full HASSRA member for a minimum period of 1 year apart from circumstances where an applicant has served less than one year as a HASSRA member and within that time they are working for a unit who move to another Department outside of National HASSRA remit

Each associate member needs to be sponsored by 2 existing full HASSRA members.

As an associate member you will be eligible to:

- Take part in any Regional or local events, competitions or activities
- Represent the Region in regionally funded activities organised by other organisations i.e. CSSC
- Purchase discount Cinema or other tickets available from HASSRA East Midlands
- Benefit from other offers & discounts organised by HASSRA East Midlands
- Serve as an ordinary member on a local HASSRA club committee

Associate members, however, cannot:

- Compete in National HASSRA events, competitions or activities
- Purchase discount Theme Park or other tickets available from National HASSRA
- Benefit from other offers & discounts organised by National HASSRA
- Purchase tickets in the National HASSRA Lottery
- Serve on the Regional HASSRA committee
- Vote at the Regional Annual General Meeting
- Serve as an Official on a local HASSRA club committee

Your Full Name (Mr/Mrs/Miss/Ms) _____

Your Address _____

_____ Post Code _____

Occupation _____ Age _____

I am eligible for Associate Membership because:

*I was formerly employed by the Dept of Health/Dept for Work & Pensions and (Please complete full reasons for your application)

I enclose a cheque for £18.00 payable to 'HASSRA East Midlands' for my annual subscription (Payable in advance)

E-mail address _____

Signature _____ **Date** _____

**It is necessary to have 2 full or retired HASSRA members acting as your sponsors.
Please ask them to complete this section.**

Sponsor No.1: Full Name _____ HASSRA Membership No. _____ Signature _____

Sponsor No.2: Full Name _____ HASSRA Membership No. _____ Signature _____

Please return this completed form, together with a cheque for your annual subscription to:

HASSRA East Midlands, c/o Jobcentre Plus, 10 Normanton Road, Derby DE1 2GW