**THE MALACOLOGICAL SOCIETY OF LONDON**

**Registered Charity No. 275980**

Membership Secretary:-

Harriet Wood

Amgueddfa Cymru - Museum Wales

National Museum Cardiff

Cathays Park, Cardiff CF10 3NP

Email - membership@malacsoc.org.uk

**Application form**

**TRAVEL AWARD**

|  |
| --- |
| **Application for the Broadening Access Membership Scheme (BAMS)** |
| **1.** | **Date of application:** |
| **2.** | **Details of applicant:** |
|  | Full name: | Title: |
| Date of birth: |
|  | Current contact address: | Tel: |
| E-mail: |
|  | Current academic level of study: MSc / PhD / Other (please give details) |
|  | Mode of study: Full time / Part time |
|  | Start date: | Expected completion date: |
|  | Title of research course: |
|  | Address of research institution: |
| **3.** | **How will you benefit from becoming a member of the** **The Malacological Society of London?** (up to 200 words) |
|  |  |
| **4.** | **Details of academic supervisor:** |
|  | Name of course supervisor: |
|  | Supervisor’s e-mail: |
|  | **Supervisor’s signature: Date:** |
|  | ***Proof of course registration must be included for this application to be considered.*** |
| **5.**  | **Signature (applicant): Date:** |