British Deer Veterinary Association Membership Application Form

\* Required Field

Full name\* ......................................................................................................................................

RCVS register number\*..............................................................................................................................

Membership Type\* Veterinary surgeon/Associate/Student

Please note our constitution requires Associate Members to have a letter of support from a veterinary member.

Place of employment and address

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Telephone number ..................................................................................................................................

Email ......................................................................................................................................

Are you a member of the BVA? Yes\*/No\*

Please describe briefly your interests in deer

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Signed......................................................... Date...........................................

Once completed, please return to [admin@bdva.co.uk](mailto:admin@bdva.co.uk)

Direct Debit Information

We require any new members to set up a Direct Debit for membership of the Association through the following links.

**BDVA Veterinarian Membership** [**https://pay.gocardless.com/AL0005J74TNQ23**](https://pay.gocardless.com/AL0005J74TNQ23)

**BDVA Associate Membership** [**https://pay.gocardless.com/AL0005J74YBGMK**](https://pay.gocardless.com/AL0005J74YBGMK)

**BDVA Student Membership** [**https://pay.gocardless.com/AL0005J74ZTRNM**](https://pay.gocardless.com/AL0005J74ZTRNM)

Direct Debits will be actioned on the 1st November of each year and the annual membership rates are as follows.

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| --- | --- |
| Veterinary Surgeon Membership | £30.00 |
| Associate Membership | £30.00 |
| Student Membership | £10.00 |

If you wish to discuss alternative ways of paying your membership fees, please email us at [admin@bdva.co.uk](mailto:admin@bdva.co.uk).