

To apply for membership please complete all the details below. Fields 3-8 are mandatory. Your application CANNOT be accepted if any of these are left blank.  
You can also apply for membership online at [www.acdm.org.uk](http://www.acdm.org.uk)

**1** Membership Application  Change of Details   
Have you been a member before? (new applicants only) Yes  No

**2** Membership No (if changing details):

**3** Full Name (must include title (Mr, Mrs, Dr etc)), First Name & Surname:

**4** Pharmaceutical Company  CRO  Other   
Company Name & Mailing Address:  
  
Company Telephone: Company Fax:  
Email:

**5** Position in Company (Title):

**6** Brief Description of role<sup>1</sup>:

**7** Brief Description of Company<sup>1</sup>:

**8** Do the changes affect the membership status of any member? (change of details only)  
Yes  No  If yes, please give details:

**Membership categories**

Membership Classification will be provided upon review of you application. There are three types of ACDM membership; Ordinary, Associate & Affiliate, all of which are the same price. Please refer to the Company By-Law on Membership Classes on the ACDM Website, for more information.

Applications cannot be processed without payment – please ensure payment is included.

Please complete the form and return it to the address below. If you are applying for membership, please return the form with a sterling cheque (drawn on British clearing bank) or Eurocheque for £42.17 + VAT (15%) made payable to the Association for Clinical Data Management.

<sup>1</sup> This information will be used for membership classification purposes only.

