



Herts Urgent Care Membership Application Form

I wish to become a member of the Community Benefit Society

Name: _____

Address: _____

Organisation: _____

Telephone no: _____ Mobile: _____

E-Mail: _____

Category of membership you are applying for:

- | | |
|----------------------------|--------------------------|
| 1. Doctor/Clinician Member | <input type="checkbox"/> |
| 2. Community Member | <input type="checkbox"/> |
| 3. Staff Member | <input type="checkbox"/> |
| 4. Other | <input type="checkbox"/> |

If other, who/what are you representing? _____

Date: _____

Please return your completed application form to:

Lesley Harris
Management Team Assistant
Herts Urgent Care
Ascots Lane
Welwyn Garden City
Herts
AL7 4HL

Herts Urgent Care Ltd.

Ascots Lane, Welwyn Garden City, Hertfordshire, AL74HL

Tel: 08445 606 606 • Fax: 01707 385901 (safe haven)

Email: info@hertsurgentcare.nhs.uk • Website: www.hucweb.co.uk

VAT no: 210 8152 53 • Reg no: Company no. IP30301R • Reg no: Gladstone House, 2 Church Rd, Liverpool, L15 9EG

