**Join your local branch** Please fill in your details below

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| Title |  | First name |  | Surname |  |
| Address line 1 |  |
| Address line 2 |  |
| Address line 3 |  |
| Town |  | Postcode |  |
| Mobile number |  |
| Telephone number |  |
| Email address |  |

|  |
| --- |
| Are you a member of The National Autistic Society? |
| Yes |  |
| No |  |

|  |
| --- |
| Are you a member of a local branch or group? |
| Yes |  |
| No |  |

|  |
| --- |
| If you are you a full paying member, would you like to nominate your local branch or group to receive a proportion of your membership fee at no extra cost to you? |
| Yes |  |
| No |  |

|  |  |
| --- | --- |
| Which branch would you like to join? |   |

|  |  |  |  |
| --- | --- | --- | --- |
| Signed  |  | Date  |   |

|  |
| --- |
| The National Autistic Society would like to keep in touch with you about our services, support, events, campaigns and fundraising. We’ll only contact you in the ways you want, and we’ll keep your data safe. (See www.autism.org.uk/privacypolicy for further details). You can update you permissions at any time by contacting us on 0808 800 1050 or at supportercare@nas.org.uk.I agree to the National Autistic Society contacting me in the following ways: (Please tick the appropriate box or boxes to ensure we can contact you) |
| Post |  |
| Telephone |  |
| E-mail |  |
| SMS |  |