



BONE

RESEARCH SOCIETY

www.brsoc.org.uk

Are you a clinician or scientist
with an interest in bone?

Would you like to join an organisation which will
support your professional development?

Do you have an interest in promoting
excellence in research and clinical treatment
of bone and its diseases?

If so, we invite you to join us!

Membership Details

The BRS is the largest national society in Europe dedicated to clinical and basic research into mineralised tissues, and is the oldest such society in the world.

Meetings are held annually, attracting a wide audience from throughout the UK and, increasingly, from continental Europe. The presentations are traditionally balanced between clinical and laboratory studies. They are published in abstract form in the Journal of Bone and Mineral Research, the leading journal in the field. The participation of young scientists and clinicians is actively encouraged.

Find out more at www.brsoc.org.uk

Members' Benefits

Your advantages as a member

- Attendance of the Bone Research Society meetings at reduced rates
- Access to travel and accommodation grants
- Young investigator awards
- Reduced subscription rates for journals in the field of calcified tissues

How much does it cost?

- Full membership: £45 per year.
- Student membership: £10 per year

How you can join

Simply fill in the application form overleaf and post or fax it to our membership office at the address shown.



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Application Form

I would like to apply for membership of The Bone Research Society:

SURNAME

FIRST NAMES

TITLE

ADDRESS

POST CODE

TELEPHONE NO

FAX NO

E-MAIL

CURRENT POSITION

RESEARCH INTERESTS

CLINICAL SPECIALITY *(where appropriate)*

HIGHER DEGREES *(for students please indicate higher degree for which studying and anticipated date of award)*

MEMBERSHIP TYPE: FULL / STUDENT *(delete as appropriate)*

Please see over for Payment Details

Payment Details

I enclose a cheque for **£45** (*full*) or **£10** (*student*)
made payable to 'Portland Customer Services'

If you wish to pay by credit card, complete below

Please charge my:
MasterCard / Visa / Switch / EuroCard (*circle*)

CARD HOLDER'S NAME

CARD HOLDER'S BILLING ADDRESS

CARD NUMBER

EXPIRY DATE

VALID FROM

ISSUE NUMBER

SIGNATURE

COUNTER SIGNATURE

(Educational Supervisor in case of those claiming student rates)

DATE

Please note that your statement will show the sale under Portland Customer Services

* Payment by direct debit will be offered with your next renewal notice

Please fax or post this form to the Membership Office at the address below.

Bone Research Society

c/o Portland Customer Services, Commerce Way, Colchester CO2 8HP

Tel: +44 (0)1206 796351 Fax: +44 (0)1206 799331

Email: brs@portland-services.com