

# Continence UK Subscriptions Form

Subscriptions to Continence UK can be made using credit/debit cards or by cheque. Please complete this application form and fax it to 01224 637378, or mail it to:

Continence UK Ltd  
Suite 3.1  
36 Upperkirkgate  
Aberdeen  
AB10 1BA

Subscriptions to Continence UK will be as follows:

- ▶▶ £60 for annual individual subscription for healthcare workers in the UK
- ▶▶ £100 for annual individual subscription for International healthcare workers
- ▶▶ £175 for institutional subscription (ie recognised hospitals and libraries)

I wish to apply for an annual subscription to Continence UK

TITLE (Dr/Mrs/Miss/Ms/Mr)..... OTHER:.....

FULL NAME:.....

JOB TITLE:..... WORKPLACE:.....

PREFERRED MAILING ADDRESS:.....

.....

TOWN/CITY:.....

POSTCODE:.....

TELEPHONE: .....

EMAIL:.....

## Credit/debit card payments

Please debit my card (tick as appropriate): Visa/Mastercard/Switch/Delta/Solo/Electron

Card Number:.....

Expiry date: ../.. Three digit security number:.....

Switch (not required for Visa/Mastercard): Start date ../.. Issue No ....

Name on card:.....

Postcode of credit card holder:.....

## Cheque payments

I enclose a cheque for £..... made payable to Continence UK Ltd. in pounds sterling. We can also accept payment in Euros or US Dollars at the current rate of exchange.

Postal applications should be sent using this reply form to the address listed above.