



CLAWAR Association Limited Membership Application Form

Class of Membership (tick ✓ as appropriate):

| | |
|--------------------------|--|
| <input type="checkbox"/> | Member, £75 |
| <input type="checkbox"/> | Student Member, £35 (Provide certification of student status) |
| <input type="checkbox"/> | Corporate Member, £500 (Provide details of contact person below) |

Personal Details:

| | | | | | |
|-----------------|--|-----------------------|------------------|---------------|--|
| Surname: | | Given name(s): | | Title: | |
| Address: | | | | | |
| Tel: | | | Mobile: | | |
| Email: | | | Webpages: | | |

Please provide the following information for your entry in the CLAWAR Members Directory. The directory will be made available to all Members.

Educational Qualifications:

| Institution | Degree | Dates |
|-------------|--------|-------|
| | | |
| | | |
| | | |

Professional details:

| | |
|-------------------------------------|--------|
| Organisation: | |
| Postal address of the organisation: | |
| Tel: | Email: |
| Personal web address: | |
| Research interests: | |
| Teaching interests: | |
| Hobbies: | |

| | |
|--------------------------|--|
| <input type="checkbox"/> | I agree my details can be included in the CLAWAR Members Directory (please tick ✓) |
|--------------------------|--|

I would like to join CLAWAR Association and agree to pay the Membership fees due. I certify that the information I have provided is correct.

Signature: _____ Date: _____

Payment (tick ✓ as appropriate): Please include your name in the payment reference

| | |
|--------------------------|--|
| <input type="checkbox"/> | UK Direct bank payment to Barclays Bank, Sort Code: 20-76-89, A/C Number: 13875660 |
| <input type="checkbox"/> | Cheque payable to CLAWAR Association drawn on a UK bank sent with this form |
| <input type="checkbox"/> | International bank payment. Contact the CLAWAR Secretary for details. Variable fees applies |
| <input type="checkbox"/> | Via Credit card and Paypal at URL: www.clawar.org/product/clawar-membership Note fee applies |

Please return the completed form with proof of payment to: CLAWAR Membership Secretary
Email: secretary@clawar.org

Our Mission: The advancement of education and science for the public benefit in the field of robotics and associated technologies
Trustees: Fareg M Aldbrez, Manuel Armada, Bryan Bridge, Seungbin Moon, Giovanni Muscato, M Osman Tokhi, Gurvinder S Virk