

## Membership Form 2018 - 19 (Part I)

**Personal Details** (Please download and complete in capital letters)

Surname of Member		Title
Maiden Name (for patients, if applicable)		
First Name(s)		
Date of Birth		Sex M/F
Address		
Postcode		
Country (If outside UK)		
Home Phone No		
Mobile Phone No		
Email Address		

**Interest in Wilson's Disease** (Please circle as appropriate or mark an X beside it)

• Patient	
• Relative of Patient(s) (Please state relationship to patient(s) and name(s) and date(s) of birth of patient(s))	
• Friend of Patient (Please state name and date of birth of patient)	

**Support Group**

- Would you like your name placed on a list with others willing to give each other support by writing, calling or meeting (Please circle one or mark an X beside it)  
Yes
No

*Signed*

*Dated*

<b>Details of Patients</b> (Please download and complete in capital letters)	
Current Treatment (please circle or mark with X)	<ul style="list-style-type: none"> <li>• Penicillamine</li> <li>• Trientine</li> <li>• Zinc</li> <li>• Tetrathiomolybdate</li> <li>• Other (please specify)</li> </ul>
Initial Symptoms	
Date of Diagnosis	
Hospital Where Diagnosed	
Initial Treatment	
Other treatments / hospital treatments / complications	
<p><i>Signed</i> _____ <i>Dated</i> _____</p>	

Please send **completed forms signed and dated, together with payment to:**

**Mrs Valerie Wheeler**, Secretary, Wilson's Disease Support Group - UK (WDSG-UK)  
**Reg. Address: 38 Grantchester Road, Cambridge CB3 9ED**

Annual Fees:	UK Membership	<b>£10.00</b>
	Non-UK Membership	<b>£12.50</b>

Please make **cheques and postal orders** payable to **WDSG-UK**

**Alternatively, payment may be made by bank transfer to:\***

Name of Account:	<b>WDSG-UK</b>
Name of Bank:	<b>HSBC</b>
Sort Code:	<b>40-35-18</b>
Account No:	<b>32536048</b>
Branch Identifier:	<b>MIDLGB2108N</b>
Int. Bank A/c No:	<b>GB43MIDL40351832536048</b>
Reference:	<b><i>Your Surname followed by your first initial</i></b>

\* For patients paying by **bank transfer**, please **do not forget** to post your membership form to **Valerie**

**Confidentiality and Data Protection**

Any information given on this sheet will be treated with strictest confidence.