



National Association of Screen Make-up Artists and Hairdressers

91 Carlton Road, Walton on Thames, KT12 2DQ

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MEMBERSHIP APPLICATION FORM - ASSOCIATE

Company Name:	
Company Address:	
Nature of Business:	
Telephone:	
Mobile:	
Fax:	
Email:	
Website:	
Contact Name(s):	
Position Held in Company:	
Any other info you think would be useful for us to know:	
Please provide a personal email for your user name and password to be sent to:	
(Please note: This email will not be published on the NASMAH website or in the directory unless you specify this is OK. We cannot provide login/password information to general emails that non-members could have access to.)	
Signature:	
Date:	

Please print this form and, once completed, post along with your cheque (payable to NASMAH) for the annual associate membership fee to: NASMAH, 91 Carlton Road, Walton on Thames, KT12 2DQ

Thank you - we will be in touch as soon as possible and you can start enjoying your membership.

Please note: If you have any information or advertising you would like us to include on the NASMAH website or in the quarterly newsletter, please do not hesitate to contact us.