

The Theosophical Society in England Diploma in Theosophy

APPLICATION FORM 2019

CLOSING DATE 1ST MARCH 2019

RETURN YOUR FORM TO:

office@theosoc.org.uk

Or post to "Diploma" Theosophical Society in England 50 Gloucester Place London W1U

For Enquiries about your Application: Email: office@theosoc.org.uk or Telephone: 020 7563 9817

INFORMATION YOU SUPPLY ON THIS FORM WILL BE TREATED IN CONFIDENCE

Date of Application:

Please complete the form <u>CLEARLY</u> using black ink or type.

Personal Details

If Handwritten Please Use Block Capitals

Title:		First Name	:		Las	st Name:			
Address:									
Postcode:									
Daytime Telephone:						Mobile:			
Email Address:									
Are you resident in the United Kingdom: Yes/No Date of Birth:									
(See Membership Card) TS Membership No: I agree to fulfill Course requirements:									
Signature: Enclose Enclo						nrolment Fee with Application £30: Non- Members £90:			
For Office Use Only									
Membership Confirmed: Yes: No: Concession									
Date Accepted: Date Copied to Administrator:									