

Application for a Student/Unsalariated Member Bursary

to attend the annual meeting of the LAGB

Name:

Affiliation:

Email address:

Postal address:

Member of LAGB: **YES** ___ **NO** ___

Status: **STUDENT** ___ **UNSALARIED NON-STUDENT** ___

Submitting an abstract: **YES** ___ **NO** ___