  
**Application to join AUDE – Associate Member**

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| Institution | |
| Name |  |
| Website |  |
| Institution’s annual income |  |
| Link to Financial Statements |  |
| On HEFCE register? |  |
| Awards foundation, teaching or research degrees? |  |
| Anticipates that the institution will be Approved or Approved (fee cap) on OfS register? |  |
| Only provides accredited ITT? |  |
| Provides 50% or more HE? |  |
| Member of CFDG and AoC? |  |

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| Primary Contact | |
| Name of Estates Director or individual with highest level responsibility for Estates |  |
| Job Title |  |
| Email |  |

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| Other colleagues who wish to join | | |
| Name | Email | Job Title |
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**I understand that membership of AUDE entitles the institution to the following benefits:**

* Access to all areas of the AUDE website, excluding the full membership database and subject specific discussion boards.
* Access to all AUDE events (some of which carry a further attendance fee).
* The opportunity to get involved in Working Groups to advance estates issues in Higher education.

**I agree that all staff at my institution will use all information obtained from the AUDE website thoughtfully and will not use membership information inappropriately. I am aware that use is monitored.**

**I agree that by joining AUDE, my institution will pay the following subscription, which will change annually by agreement at AGM.**

The subscription year runs from 1st August to 31st July. If joining after 1st January, 50% subscription will be due.

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| **Subscription rates**  **Silver level access** | **£ excludes VAT** |
| Associate Member | 1,530 |

Please supply the invoice address and any Purchase Order number that may be required.

Signed …………………………………………………………………………………………….. Date ……………………………………

Authorised on behalf of your institution