

Application for Membership of

The eLearning Alliance



eLearning Alliance

bridging sectors -
- uniting communities

Name of main contact	<input type="text"/>		
Name of organisation	<input type="text"/>		
Job title	<input type="text"/>		
Address	<input type="text"/>		
Postcode	<input type="text"/>	Telephone	<input type="text"/>
Email	<input type="text"/>		
Website	<input type="text"/>		

Annual Membership Packages – please mark your preferred option(X)

Type of Membership	Annual Membership Package
<input type="checkbox"/> Individual Member	£90
<input type="checkbox"/> Organisation Member	£250
<input type="checkbox"/> Supplier	£500

Which areas of eLearning are the biggest priority for you/your organisation (mark with an X)

<input type="checkbox"/> Internal content development	<input type="checkbox"/> Buying eLearning content	<input type="checkbox"/> Buying Tools/Technology	
<input type="checkbox"/> Managing content	<input type="checkbox"/> Managing learners	<input type="checkbox"/> Reducing costs	<input type="checkbox"/> Culture change
Other (please specify)	<input type="text"/>		

Payment Options (mark your preferred option with an X)

<input type="checkbox"/> I enclose a cheque (payable to eLearningScotland)			
<input type="checkbox"/> Please invoice me (Purchase Order Number <input type="text"/>)			
Invoice address:	<input type="text"/>		
Where did you hear about the eLearning Alliance?	<input type="text"/>		
Signed	<input type="text"/>	Date	<input type="text"/>