**BAPM Honorary Member – Nomination form**

Please note that to nominate someone for honorary membership of BAPM you must be a BAPM member. The nominee does not have to be an existing BAPM member.

**Your Details:**

|  |  |
| --- | --- |
| Name: |  |
| Unit: |  |
| Hospital: |  |
| Email: |  |
| Phone: |  |

**Nominee Details:**

|  |  |
| --- | --- |
| Name of nominee: |  |
| Unit: |  |
| Hospital: |  |
| Email: |  |

**Entry:**

Please explain in 250 words or less why the above individual should be nominated for honorary membership of BAPM. Please refer to the criteria and provide specific examples of their work and achievements.

Please return to bapm@rcpch.ac.uk by the deadline.