

Please complete and return this declaration with your application for membership.

**Full registered name**

Surname: \_\_\_\_\_

Given name: \_\_\_\_\_

Please answer one of (a) or (b) below:

(a) I have written the Statutory French Test  
and obtained a result of

Pass

Fail

(b) I have not written the Statutory French  
Test, but intend to write it

Yes

No

**X** \_\_\_\_\_  
Signature

\_\_\_\_\_  
Date