**The British Pain Society**

**Web Link Permissions Request Form**

This form should be used to request permission to request the Society includes a web link to your website.

|  |  |
| --- | --- |
| **Requestor details** | |
| Your name |  |
| Your institution |  |
| Institution address |  |
|  |  |
|  |  |
| Postcode |  |
| Telephone number |  |
| E-mail address |  |
|  |  |
| **Your website** |  |
| Title of your website |  |
|  |  |
| Webmaster/ contact person |  |
|  |  |
| **Requested BPS link** | |
| Please describe in detail your proposal |  |

**Please return your completed form to:** [**publications@britishpainsociety.org**](mailto:publications@britishpainsociety.org)