

CONTRIBUTING
TO A RESULT



FABRICATED
ACCESS COVERS
TRADE ASSOCIATION

FABRICATED ACCESS COVERS TRADE ASSOCIATION

42 Heath Street, Tamworth, Staffordshire, B79 7JH

MEMBERSHIP APPLICATION

Type of membership applied for:

FULL	<input type="checkbox"/>
ASSOCIATE	<input type="checkbox"/>

1 YOUR COMPANY:

Company Name:

Address:

Telephone & Fax:

E-mail:

Website:

Company registration no:

Date commenced trading in
access covers industry:

Date of registration:

Date commenced
manufacturing access
covers*:

** if applicable*

Directors, partners
or proprietors:

Name(s):	Qualifications:	Years experience in access covers industry:
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>

Name of parent company (if any):

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Name(s) of associated or subsidiary companies (if any):

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2 YOUR PRODUCTS AND SERVICES:

Products and services offered:

(for products, please indicate whether manufactured or factored, and whether covered by a third party test.

Product/service:	Manufactured: (Y/N)	Test standard: (if any)

Quality system:

(Please give details of any externally-audited quality system)

Standard: (eg ISO 9001)	Certification body: (eg LPC, BSI &c)	Scope of system (products covered &c):

Numbers of employees, including directors:

Admin.	<input type="text"/>
Sales	<input type="text"/>
Works	<input type="text"/>
Installation	<input type="text"/>
TOTAL:	<input type="text"/>

3 REFERENCES:

Proposer:

Secunder:

Please give details of 3 recent projects:

Project:

Architect:

Contractor:

Product:

Value:

Date completed:

Project 1	Project 2	Project 3

4 DECLARATION

If elected, I/we* hereby agree to abide by the Constitution & Rules of Association, copies of which I/we* acknowledge receipt and I/we* undertake to pay membership subscriptions and other moneys due to the Association immediately they become due. I/we* understand that failure to provide accurate and truthful information may result in the termination of membership. I/we* accept that the decision of the Managing Committee regarding this application for membership is final and that no further correspondence or reasons regarding the decision made can be entered into.

Signed:..... Dated:.....

Position in company:.....

** delete as applicable*

Fabricated Access Covers Trade Association

42 Heath Street, Tamworth, Staffs B79 7JH

Tel: 01827 52337, fax: 01827 310827

FULL MEMBERSHIP SUBSCRIPTION 2010

£750 + VAT

ASSOCIATE MEMBERSHIP SUBSCRIPTION 2010

£250 + VAT