

Associate Membership Application Form



Business details -

Business name		
Address Line 1		
Address Line 2		
Address Line 3		
Town	Postcode	
Telephone		
Email		
Website		
Facebook		
Twitter		

Main contact - Who should be our primary contact regarding your membership?

Main contact name		
Job title		
Telephone	Mobi	e
Email		

About your organisation - Please tick the option that best describes your organisation:

□ Merchant	□ Manufacturer	□ Distributor	□ Supplier		
\Box College/Training Centre \Box	🗆 College/Training Centre 🗆 Local Authority 🗆 Housing Association 🗆 Technology Provider 🗆 Professional				
Services Provider 🗆 Other, pl	ease specify:				
How many branches do you h	ave? (if applicable)				
What type of products/services do you offer?					



Reason for joining SNIPEF - Why would you like to become a SNIPEF Associate Member?

Marketing contact - Who should we contact for marketing purposes? (if different from above)

Marketing contact		
name		
Job title		
Telephone	Mobile	
Email		

Finance contact - Who should we send invoices to? (if different from above)

Finance contact name		
Job title		
Telephone	Mobile	
Email		

Scotland/Northern Ireland representatives – List below any area representatives who should

receive *PlumbHeat*, newsletters and information on activities and events.

Representative name		
Job title		
Area covered		
Telephone	Mobile	
Email		



Representative name		
Job title		
Area covered		
Telephone	Mobile	
Email		

Representative name	
Job title	
Area covered	
Telephone	Mobile
Email	

Representative name		
Job title		
Area covered		
Telephone	Mobile	
Email		

Membership fee

The annual Associate Member subscription fee is £300 +VAT. On receipt of your completed application form, an invoice will be issued for the current subscription year on a pro-rata basis. Subsequently, the annual Membership Subscription will be due on January 1st each year.

Membership will only start when payment for the membership subscription has been received.

For any queries or for further information please contact the SNIPEF Membership Team on 0131 556 0600 option 1 or email <u>membership@snipef.org</u>

Declaration

I declare that to the best of my knowledge all information submitted is correct. I fully understand the submission of any misleading information will jeopardise my membership. I have read and understand how SNIPEF Management Ltd manages personal data. (Privacy Notice is available on the SNIPEF website here: www.snipef.org/privacy.htm)

Signature	Date	
Name	Position	