

# CiB membership application form

If you wish to join, please complete and return to the address below

Date of birth: .....

Title (Mr, Mrs, Miss, Ms, other): .....

Forenames: .....

Surname: .....

## BUSINESS

Job title: .....

Employer: .....

Address: .....

.....

.....

.....

Postcode: .....

Telephone: .....

Fax: .....

Mobile: .....

E-mail: .....

## HOME

Address: .....

.....

.....

.....

Postcode: .....

Telephone: .....

Fax: .....

Mobile: .....

E-mail: .....

Tick if you want us to use your home address [ ]

Job responsibilities: .....

.....

.....

Nature of business: .....

.....

.....

Please accept my application to join CiB. I wish to become an individual associate member, for the annual subscription fee of £194.12\* (£178.50 ex. VAT) plus a £65.25\* (£60 ex. VAT) joining fee.

\* Note: VAT is charged on 50% of the annual associate membership fees and the joining fee.

[ ] I enclose a cheque for £259.37.

[ ] I would like to pay by Direct Debit

[ ] Please send me an invoice

[ ] Please debit by credit card no: .....

.....

Expiry date: .....

Signature: .....

Date: .....

If you wish to upgrade to full membership please tick here and your upgrade will be dealt with after processing this initial application. Full membership costs no more but requires proof of professional experience.

[ ]

NP if this is a corporate application please photocopy this form for

### For office use

[ ] Member

[ ] Associate

Date received .....

Membership no: .....

Invoice no: .....

Subscription received: .....



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Woodlands Business Park,  
Breckland,  
Linford Wood West,  
Milton Keynes MK 14 6EY