**METHOD OF PAYMENT** Direct Debit Credit/Debit Card Cheque BACS Payment

Please tick as appropriate

#### MEMBERSHIP APPLICATION FORM

Company Name - Trading as:……………………………………………………………..……………..………………

Contact (Mr/Mrs/Ms/Miss) ...................................................Position..................................................................

Business Activities ...............................................................................................................................................

Address................................................................................................................................................................

.............................................................................................................................................................................

Postcode...............................................................................No of Employees:. ………………...........................

Tel No: ..................................………………………………... Fax No: ..............................................................…

Mobile No:………………………………………………………………………………………………………………..…

Web Site:….....................................................................…………………………………………………………..…

E-mail address – for Chamber Administration.:……………..…………………………………….…………………...

**MEMBERSHIP DIRECTORY ON CHAMBER WEBSITE**

**Public Page:** We will list your company name, website and telephone number. If you do not wish to have your contact number listed please tick here

**Private Members Only Area:** We will list your contact details excluding your email address on the downloadable members list, available for members only. If you do not wish to have your email address listed please tick here

**Reasons for joining (please select):**

Networking  International / Export  Business Advice

Publicity  Representation  Other

**Other key staff to be circulated newsletters (please tick)**  
 Events Newsletter Policy B2B’s

Name .................................................................................

Email Address …………………………………………………………….…………………………………………….…

Name .................................................................................

Email Address …………………………………………………………………….…………………………………….…

Name .................................................................................

Email Address …………………………………………………………………………….…………………………….…



**Please indicate if you would like to be involved with the following**

Yes No

Wall Planner Advertising    
  
Diary Advertising    
  
Sponsorship

Thinking Business Magazine

|  |  |  |  |
| --- | --- | --- | --- |
| **Subscription Rates** | | | |
| **Number Employees** | **Subscription Rates** | **Joining**  **Fee** | **TOTAL**  **Inc VAT (@ 20%)** |
| **1 - 9** | **£ 199** | **£30** | **£274.80** |
| **10 - 19** | **£ 249** | **£30** | **£334.80** |
| **20 - 49** | **£ 319** | **£30** | **£418.80** |
| **50 - 99** | **£ 429** | **£30** | **£550.80** |
| **100 - 199** | **£ 609** | **£30** | **£766.80** |
| **200 - 499** | **£ 959** | **£30** | **£1186.80** |
| **500 - 749** | **£1329** | **£30** | **£1630.80** |
| **750+** | **Negotiable** |  |  |

**Please make cheques payable to ‘Kent Invicta Chamber of Commerce' and return to   
Head office, Ashford Business Point, Waterbrook Avenue, Sevington, Ashford, Kent, TN24 0LH**

I/We wish to apply for membership of Kent Invicta Chamber of Commerce, subject to the terms and conditions of the Memorandum and Articles of Association. I/We enclose herewith the annual subscription of £.................…...

Signed ................................................................................ Date ......................................................................

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  
  
For Office Use Only

Approved by:…………………………………….……….. Dated:…………………………………………..…..………

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