

APPLICATION

On behalf of the organisation referred to below, I, the undersigned, apply for membership of Mansfield 2020. I agree to guarantee the sum of £1.00 in the event of liquidation, and to pay the annual subscription at the rate set from time to time.

Name of Organisation: _____

Address of Organisation: _____

Postcode: _____

Telephone Number: _____

Fax Number: _____

E-mail Address: _____

Web Page Address: _____

Type of Business _____

Name of Authorised
Representative in the
Organisation _____

Membership subscription = Number of F/T employees _____ * = £ _____

*** (1-5 employees minimum subscription £100.00 + VAT)
(6-10+ employees minimum subscription £250.00 + VAT)**

Please do not enclose a cheque, we will forward a VAT invoice appropriate to your subscription

Signed: _____

Full Name: _____

Position: _____

Date: _____

Who recommended
Mansfield 2020
to you? _____