

## Application for membership (please tick)

<b>Micro company</b> <hr/> <b>£350</b> Per annum <hr/> <b>0–10 Employees</b>	<b>Small company</b> <hr/> <b>£600</b> Per annum <hr/> <b>11–49 Employees</b>	<b>Medium company</b> <hr/> <b>£900</b> Per annum <hr/> <b>50–249 Employees</b>	<b>Large company</b> <hr/> <b>£2000</b> Per annum <hr/> <b>250+ Employees</b>	<b>Outside of North West</b> <hr/> <b>£1500</b> Per annum <hr/> <b>Non-North-West-based SMEs only.</b>
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Please tick here if you are an SME and are interested in SMMT services.

### Contact information

Principle contact name: <input type="text"/>		Company name: <input type="text"/>	
Position: <input type="text"/>	Direct tel: <input type="text"/>	Company address: <input type="text"/>	
Company fax: <input type="text"/>	Mobile: <input type="text"/>		
Company tel: <input type="text"/>	Website: <input type="text"/>		
Contact email: <input type="text"/>		Company email: <input type="text"/>	

### Additional contacts

Name: <input type="text"/>		Name: <input type="text"/>	
Position: <input type="text"/>	Direct tel: <input type="text"/>	Position: <input type="text"/>	Direct tel: <input type="text"/>
Email: <input type="text"/>		Email: <input type="text"/>	

### Company information

Brief company overview including summary of products and services:

Business category (please tick):

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Business support | <input type="checkbox"/> Government                 | <input type="checkbox"/> Manufacturing            |
| <input type="checkbox"/> Consultancy      | <input type="checkbox"/> Logistics and distribution | <input type="checkbox"/> Research and development |
| <input type="checkbox"/> Education        |   |   |

Relevant quality certifications:

Number of employees:

Annual turnover:

### Method of payment

Please choose a payment schedule and complete:

- Annual payment       Monthly standing order

Purchase order number:

Bank name and address:

Account number:

Sort code:

I certify that the information contained in this form is accurate, and that I have read and agree to the enclosed Terms and Conditions.

Print name:

Position in company:

Signed:

Date:

Please complete and return to the address on the back of this brochure.