



STRICTLY CONFIDENTIAL

## MEMBERSHIP APPLICATION FORM

### COMPANY DETAILS

<b>Company Name:</b>			
<b>Registered Address:</b>			
<b>Tel No:</b>		<b>Fax No:</b>	
<b>Company Registration No:</b>			

### APPLICANT DETAILS

	<b>Title</b>	<b>Forename(s)</b>	<b>Surname</b>
<b>Name:</b>			
<b>Position:</b>			
<b>Mailing Address:</b> <i>(if different from above)</i>			
<b>Tel No:</b>		<b>Fax No:</b>	

**CLASS OF MEMBERSHIP APPLIED FOR**

Please tick appropriate box

**FULL**

**ASSOCIATE**

**RELEVANT INFORMATION AND APPLICATION FEE**

Please supply with this form such supporting documentation/information as you believe demonstrates your eligibility for membership of SAFed, for example *Annual Report and Accounts, Promotional Literature etc*

The information supplied should be sufficient to enable consideration to be given to your application.

All applications are to be accompanied by payment of the application fee — £250 plus VAT (£300). Cheques should be in sterling, made out to the “Safety Assessment Federation Ltd” and be drawn on a UK bank and crossed “A/C payee only”.

Note: *Applications which do not meet the membership criteria will be refunded the application fee.*

**DECLARATION**

**I hereby declare that our turnover\* in the previous annual accounting period (£m)**

\*See accompanying notes for definition of turnover

\_\_\_\_\_

**COMPLETED BY (Please print)**

\_\_\_\_\_

**Signature**

\_\_\_\_\_

**Date**

\_\_\_\_\_

**PLEASE RETURN marked ‘In confidence’ TO:**

*Chief Executive  
Safety Assessment Federation  
1<sup>st</sup> Floor, 70 South Lambeth Road  
London SW8 1RL*