

## Full Membership Application Form

Please fill out the following form

Please print your completed form and send a signed scanned copy to info@corporateregister.com	
YOUR DETAILS	
First Name:	
Last Name:	
Your Job Title:	
Country:	
Username:	
YOUR ORGANISATION	
Organisation Name:	
Organisation Address:	
Post Code:	
City:	
Telephone:	
Email:	
MEMBERSHIP PREFERENCES	
Your Sector:	
DISCOUNT ELIGIBILITY	
Is your organisation an SME/non-profit? Yes No	
(You qualify for a discount if your organisation is an SME (<50 employees) or a non-profit)	
FEES	
GBP999 annually for up to three individuals. GBP1499 annually for up to five individuals from the same organisation.	
Discounted rate: GBP599 annually for up to three individuals.	
Contact info@corporateregister.com for rates for more individuals.	
Your preferred payment method:	
Cheque Bank Transfer Credit Card	
Do not send us credit card details – we will contact you	
YOUR SIGNATURE	
I have read and understood the Terms of Service and agree to them	
Signature:	
Date: / /	