

Membership Application Form 2019/20

ASSOCIATE

Please complete and return this form together with the required supporting documentation and remittance to ensure your application can be processed to NIA, The Incuba, 1 Brewers Hill Road, Dunstable LU6 1AA or by email info@nia-uk.org

Any member wishing to apply in more than one category of membership must complete multiple applications and payments.

1. GENERAL INFORMATION		ı
Company Name:		
Address:		
Postcode:	Main Contact Number:	
	s to contact:	
2. KEY CONTACT DETAILS		
Name:		
		Direct Dial No:
E-mail:		
3. MAIN ACTIVITIES OF THE	ORGANISATION	

4. AREAS COVERED				
Please tick the areas that your Company covers:				
Scotland Northern Ireland Wales South England (incorporating the Midlands) North England				
5. COMMUNICATION				
The NIA's main method of communication to its members is the right person, please let us know who you would like to r				
Contact name	E-mail addres	ess Direct Dial Telephone No.		
1				
2				
3				
6. We confirm that the information provided herewith is ac	curate to the best	st of our knowledge.		
We undertake that, we will abide by the Association's Articles, Code of Professional Practice and Conditions of Membership. The NIA retain the right to reject any application.				
Signed:	Date:			
Position:	Date:			
SUPPORTING POSIMENTATION				
SUPPORTING DOCUMENTATION Please provide copies of:				
Completed Application Form				
 Cheque or confirmation of BACS Payment (iii 	nclusive of referer	ence number)		
◆ Resume of 100/150 words outlining the activ				
 JPEG of Company logo 				
Please return with supporting documentation to				
National Insulation Association Ltd,				
The Incuba, 1 Brewers Hill Road, Dunstable LU6 1AA				
Or				
info@nia-uk.org				