

MEMBERSHIP APPLICATION FORM

SOLE TRADERS/DRINK MANUFACTURERS

Please submit my name to the:

Eastern / London / Midland/ Northern / Western / Irish / International
Section for election as an **Associate Member** of the BFBi

If elected I/We undertake to abide by the Rules and Bylaws and Code of Conduct YES/NO
(please delete as applicable)

PURCHASE ORDER NO. _____

Applicant Name _____

Job Title _____

Company Details _____

_____ Post Code _____

Tel No: _____ Fax No: _____

Email Address _____

Web site _____

VAT Number _____

Brief Description of Business _____

No. of Years Trading _____

Signature _____ Job Title _____

Print Name _____

The Annual Subscription is **£255.00 + VAT.**

Office use only:- Commencement date ____/____/____