

**ORGANISATION DETAILS** (Please use block capitals)

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Post Code: \_\_\_\_\_ Tel: \_\_\_\_\_

Company Email: \_\_\_\_\_

Website: \_\_\_\_\_

Annual Turnover: £\_\_\_\_\_ No of Employees: \_\_\_\_\_

**FINANCE MANAGER CONTACT DETAILS (if different)**

Contact Name: \_\_\_\_\_

Contact Email: \_\_\_\_\_

**MAIN MEMBERSHIP CONTACT DETAILS**

Contact Name: \_\_\_\_\_

Position: \_\_\_\_\_

Contact Email: \_\_\_\_\_

**SOCIAL MEDIA DETAILS:**

Twitter: \_\_\_\_\_

LinkedIn: \_\_\_\_\_

Facebook: \_\_\_\_\_

**HR MANAGER CONTACT DETAILS (if different)**

Contact Name: \_\_\_\_\_

Contact Email: \_\_\_\_\_

**NATURE OF BUSINESS: this information is used to describe your business – no more than 10 words please**

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Is your company a subsidiary? YES/NO If yes, name of parent company: \_\_\_\_\_

**TYPE OF BUSINESS**  Sole Trader  Partnership  Limited Company  Other: (please specify) \_\_\_\_\_

**SECTOR:** Please select the ONE sector which most applies to your business

- |  |   |  |   |
|--|---|--|---|
| <input type="checkbox"/> Accountancy &/or Finance                      | <input type="checkbox"/> Health & Safety              | <input type="checkbox"/> Pharmaceutical                                | <input type="checkbox"/> Conference Facilities &/or         |
| <input type="checkbox"/> Aerospace                                     | <input type="checkbox"/> Healthcare &/or Wellbeing    | <input type="checkbox"/> Photography                                   | <input type="checkbox"/> Catering                           |
| <input type="checkbox"/> Architects &/or Surveyors                     | <input type="checkbox"/> HR Services &/or Recruitment | <input type="checkbox"/> Printing Services-Inc. CAD & Graphic Printing | <input type="checkbox"/> Education                          |
| <input type="checkbox"/> Art &/or Graphic Design                       | <input type="checkbox"/> I.T &/or Telecommunications  | <input type="checkbox"/> Property Services &/or                        | <input type="checkbox"/> Electrical &/or Electronics        |
| <input type="checkbox"/> Automotive                                    | <input type="checkbox"/> Insurance                    | <input type="checkbox"/> Maintenance                                   | <input type="checkbox"/> Engineering - Inc. Civil           |
| <input type="checkbox"/> Building &/or Construction                    | <input type="checkbox"/> Legal Services               | <input type="checkbox"/> Research & Development                        | <input type="checkbox"/> Environmental Services - Inc.      |
| <input type="checkbox"/> Business Support Services                     | <input type="checkbox"/> Logistics, Freight &/or      | <input type="checkbox"/> Retail  | <input type="checkbox"/> Recycling                          |
| <input type="checkbox"/> Charitable Organisations                      | <input type="checkbox"/> Distribution                 | <input type="checkbox"/> Security Services                             | <input type="checkbox"/> Event Organisers Press,            |
| <input type="checkbox"/> Chemical Products Export &/or Import Services | <input type="checkbox"/> Machinery                    | <input type="checkbox"/> Social Enterprise                             | <input type="checkbox"/> Media &/or PR                      |
| <input type="checkbox"/> Food &/or Drink                               | <input type="checkbox"/> Manufacturing                | <input type="checkbox"/> Training &/or Apprenticeships                 | <input type="checkbox"/> Utilities - Energy, Gas &/or Water |
| <input type="checkbox"/> Manufacturing                                 | <input type="checkbox"/> Marketing &/or Research      | <input type="checkbox"/> Council &/or Community                        |   |
| <input type="checkbox"/> Health, Beauty &/or Fitness                   | <input type="checkbox"/> Multimedia &/or Website      |  |   |
|  | <input type="checkbox"/> Office Supplies              |  |   |

Keywords (maximum of 20 to be used in the online member directory by other members to search for the products or services you offer):

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**EXPORT OPPORTUNITIES: Are you:**

- None Exporter  Potential Exporter  Active Exporter

**REASONS FOR JOINING:**

- Networking                       Chamber discounts/services                       Business information/advice                       Policy/representation  
 Increase organisation profile                       Export documentation                       International Trade advice

**RENEWAL DATE FOR INSURANCES:**

\_\_\_\_/\_\_\_\_/\_\_\_\_

**MEMBERSHIP DETAILS:**

- Startup (2 yr discount)                       Charity                       Standard                       Strategic

**Subscription** (ex VAT) £ \_\_\_\_\_                      **VAT:** £ \_\_\_\_\_                      **Total** (inc. VAT) £ \_\_\_\_\_

**LOCAL COUNCIL:**

- Walsall                       Wolverhampton                       Sandwell                       Dudley                       Other

**MEMBERSHIP DECLARATION:**

I have completed this form to the best of my knowledge and confirm that the information supplied is accurate at the date of completion. I accept that the Chamber may undertake a credit reference in respect to this application. Black Country Chamber of Commerce complies with the requirements of the 1998 Data Protection Act.

I agree that the information given by me can be used in the ways set out in the Membership Terms and Conditions. I will contact the Database Administrator in writing if I do not wish to receive communications (eg mail shots, faxes or emails) or have my data collected by the Chamber.

In order to benefit from the Chamber Legal Expenses Insurance policy, all member and prospective member businesses must notify Timmins Whittaker (via 01384 480 899 or [m.worthington@timminswhittaker.co.uk](mailto:m.worthington@timminswhittaker.co.uk)) in the following circumstances which will need to be referred to insurers prior to the member or prospective member being indemnified under this policy:

- If there is any cause, event or circumstance which may give rise to a claim being made under this insurance which has not already been notified to Abbey Legal Protection
- If an Insurer has ever refused commercial legal expenses insurance, imposed special terms or declined to renew a commercial legal expenses insurance policy
- If there has been more than one claim or dispute to which this insurance would have applied in the last 3 years
- If there has been a claim or any dispute in the last 3 years to which this insurance would have applied in which fees or expenses exceeded £3,000
- If the member is not domiciled within The United Kingdom of Great Britain and Northern Ireland
- If the member has more than 250 employees

**The minimum membership period is 12 months. In accordance with Article 9 of the Chamber's Articles of Association, a member must give 3 months' notice of termination prior to their renewal subscription date.**

**NAME:** \_\_\_\_\_

**POSITION:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

**DATE:** \_\_\_\_\_

Your data will be published in the online member directory and in the new members list on the Chamber website. If you do not wish to appear in either of the lists, please tick this box.

**OFFICE USE ONLY – UPDATE ON CRM**

**RECRUITED BY:** \_\_\_\_\_                      **ACCOUNT MANAGER:** \_\_\_\_\_

**SOURCE:** \_\_\_\_\_

**CRM CHECKED (RECRUITER):**                       **INITIALS:** \_\_\_\_

**PAYMENT RECEIVED: (RECRUITER)**                       **INITIALS:** \_\_\_\_

*WELCOME PACK TO INCLUDE THE FOLLOWING FLYERS:*

**ADMINISTRATION:**

**CRM CHECKED (ADMINISTRATOR):**                       **INITIALS:** \_\_\_\_

**PAYMENT CHECKED (ADMINISTRATOR):**                       **INITIALS:** \_\_\_\_

**WELCOME PACK SENT (ADMINISTRATOR):**                       **INITIALS:** \_\_\_\_