



Association of Meat Inspectors Membership

Please complete the following information In Full and using Capital Letters. Failure to provide full details could delay your application. New members will be added to the Voluntary Professional Register.

Please return the form to;
Michelle Barrett
Laurel Cottage,
Preston Marsh,
Preston Wynne,
Hereford HR1 3PE

Name

Address

..... Postcode

Telephone No

Email Address

Employer

Designation

Qualification held & Certificate Numbers

.....

Qualification Date / Place.....

Proposer Membership No

Signed

To apply for Full membership please enclose remittance of £80.00 with application form.
Applications received after 31st July – half the above.
Student Membership; please enclose remittance of £30.00.

The Annual Subscription is due on the 1st January

The Full Annual Subscription is £80.00
Retired Member Subscription is £30.00
Subscriptions are eligible for Tax relief.
Please use the Standing Order Facility

I hereby apply for membership to the Association of Meat Inspectors (GB) Ltd. and agree to abide by the rules of the Association. I have no objection to the details contained in this application being retained in the Association computer. The Voluntary Professional Register, as published on the Association website, will display your full name and County of Residence. I agree to abide by the Association’s Code of Conduct.

Signed..... Date.....

Cheques made payable to; “The Association of Meat Inspectors (GB) Ltd”
Applicants **MUST** be qualified in accordance with the relevant European and National Legislation.

Sight of a copy of your certificates may be requested.

DO NOT DETATCH

BANKERS ORDER

To (your bank)

.....Post Code.....

On the 15th January....., please pay to the HSBC Bank plc, 2 Fore Street, Wellington, Somerset, TA21 8AH, Bank Sort Code 40-46-05, for the credit to the Association of Meat Inspectors (GB) Ltd. Account No; 01110322, the sum of £80.00* or £30.00* and the same sum annually until cancelled by me.

*delete as appropriate

Full Name.....

Address.....

.....Post Code.....

Signed.....Date.....