



# APPLICATION FOR MEMBERSHIP

## I'm backing Mansfield!

Membership of the Mansfield BID Company is open to all organisations eligible to pay the Mansfield Business Improvement District (BID) levy, or make a voluntary contribution as a business in the area. Members are entitled to vote on Company matters at all Annual and Extraordinary General Meetings (A/EGMs).

**Any organisations wishing to become a member of the Company must nominate ONE NAMED REPRESENTATIVE. This person will be authorised to vote on behalf of your organisation at subsequent A/EGMs.**

An individual from your organisation's senior management team or its board must co-sign this application to authorise it, when appropriate. We will endeavour to collect the form from you within one week. If the form has not been collect by then, please send it or hand it in to:

The Mansfield BID Company Ltd, The Old Town Hall, Market Place, Mansfield, NG18 1HX.

Please contact John Sankey MBE, the chairman or email him via enquiries@mansfieldbid.com if you have any queries about completion of this form or the activities of the Mansfield BID Company.

DETAILS OF THE MEMBER ORGANISATION:	
Name of organisation:	
Address within the BID area:	
Postcode:	
Email address:	
THE NAMED REPRESENTATIVE:	
Title:	
Forename:	
Surname:	
Postal address:	
Postcode:	
Telephone No:	Mobile No:
Email address:	
MEMBERSHIP DECLARATION:	
Our organisation wishes to become a member of the Mansfield BID Company. We agree to be bound by the Memorandum and Articles of Association of the company. Under Data Protection legislation, we understand that the information provided by us on this form will be processed solely by the BID Company or its appointed agent and will then only be used to provide our organisation with the benefits of membership due to it, and to supply us with information about the Mansfield BID Company and its activities. The details will NOT be passed onto a third party for the purposes of unsolicited literature, phone calls, emails or visits.	
NAMED INDIVIDUAL REPRESENTING THE ORGANISATION:	
Signed:	
<b>Senior Management authorisation (on behalf of the organisation)</b>	
Name:	
Position:	
Email address:	
Contact Telephone No:	
Signed:	Date: