

# EDUCATION PARTNER PRIVATE PROVIDER MEMBERSHIP APPLICATION

### **APPLICANT INFORMATION**

Organisation:	
Address:	
	Postcode
Contact Name:	Position
Email:	Telephone
Mobile:	Website
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### **ABOUT THE ORGANISATION**

Description of organisation - 15 words max (for member promotion activities)

### **FASHION/TEXTILE COURSES**

Please provide a list of fashion and textile related courses that you deliver

# PAYMENT OPTIONS

Please tick	payment method				
1.	Full payment of annual subscription in advance by BACS Santander - sort code: 09-02-22; account number: 10587126				
2.	Full payment of annual subscription in advance by Debit/Credit Card or cheque				
3.	Direct debit payment of 10 installments (please complete direct debit mandate)				
Credit card	d details (required if	selected payment 2 a	bove)		
	Visa	Mastercard	Switch / Mase	tro	
Card type:	Solo	Amex	Delta		
Debit A ncluding 20	mount: % VAT) £ 600	Co	ardholder Name:		
Company	:				
Cardhold Addre					
			Postcod	e:	
Card Number		Issue Number:			
Start Date	:	Expiry Date:		Security Code:	(last 3 digits printed on back of card)
SIGNATU	JRES				
		dar year and renewed resignation is required		ould a member not w	ish to continue at any time,
I agree to	pay UKFT subscript	ion for 12 months			
Membersh Catego		N PARTNER PRIVATE	PROVIDER	Date:	
Subscription (Including	on Amount: g 20% VAT) £ 600				



Signature:

Date:

## FINANCE CONTACT

Pleas	e provide the best contact for finance handling if different to applicant contact:
	ntact Position: ame:
Eı	mail: Telephone:
PRIV	ACY POLICY & COMMUNICATIONS
Pleas	e tick to confirm you consent to the following:
	I understand and accept that UKFT needs to store and use my personal information to process my application and offer membership services.
	Your bank details will be held by our accounts department and will not be shared with any other parties.
	To view our Privacy Policy which informs you how we handle the information we obtain from you, please visit <a href="https://www.ukft.org/privacy-policy">www.ukft.org/privacy-policy</a>
	I confirm I have read and understood the UKFT Membership Terms and Conditions
	I (and all colleagues listed) wish to subscribe to UKFT's e-newsletter and other bulletins
List o	f colleague names and email addresses:
WHE	ERE DID YOU HEAR ABOUT UKFT?
	all that apply
TICK	
	Online search - please share what you were searching for:
	Recommendation - please share who from:
	Social media - please share which platform:
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