



APPLICANT INFORMATION

Registered Company Name:

Address:

Contact Name:

Email:

Mobile:

Business Name (if different):

Postcode:

Position:

Telephone:

Website:





ABOUT THE BUSINESS

Description of product/service - 15 words max (for member promotion activities)

PRODUCTION PROCESS

Tick all that apply

Spin

Weave

Knit

Coating

Dye

Finish

Print

Tick all that apply

Design & Sampling

SERVICE INFORMATION

Non-woven

 $Stock \ Service \ (If yes please \ advise \ minimum \ order \ quantity)$

 $\begin{cal}Commission\end{cal} (If yes please advise minimum order quantity) \end{cal}$

PRODUCT INFORMATION

Tick all that apply

Textile by fibre

Cotton Linen Worsted Acrylic

Felt Imitation Leather/ Polyester Leather/Suede Suede

Velvet Viscose Wool Alpaca/Angora/

Vicuna

Bamboo Mohair Fleece Jersey

Knit Fabric Tweed Horsehair Lace

Narrow Fabrics Waxed Cotton Cashmere Flannel

Corduroy Polyamide Gauze/Webbing Silk

Organic Elastic Aramid Technical Fabrics

Other (please specify)

Textile by end use

Fashion Sports Medical Interiors

Military Automotive / Construction

Aerospace

Other (please specify)

SUBSCRIPTION RATES

MEMBERSHIP	TURNOVER	Annual Membership excluding care labelling licence		
CATEGORY		ex. VAT	incl. VAT (20%)	
Starter	Up to £250k	£435	£522	
Starter Premier	£250k - £1m	£820	£984	
Small	£1m - £5m	£1,630	£1,956	
Medium	£5m - £15m	£2,165	£2,598	
Large	£15m - £35m	£3,255	£3,906	
Very Large	£35m+	£5,410	£6,492	



PAYMENT OPTIONS

Please tick payment methor	O
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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 (paid via GoCardless, we will send the link to you to set this up)				
Credit card	details (required if se	elected payment 2 above			
Card type:	Visa	Mastercard	Switch / Masetro		
	Solo	Amex	Delta		
Debit / (Including 2 Company			Cardholder Name:		
Cardhold Addr			Postcode:		
Card Number		Issue Number:			
Start Date	2:	Expiry Date:		Security Code:	(last 3 digits printed on back of card)
SIGNATUI	RES				
		r year and renewed autor esignation is required.	natically. Should a member not w	ish to continu	e at any time,
I agree to p	ay UKFT subscriptior	n for 12 months			
Members Catego	·				
	ion Amount: ng 20% VAT)				
Signatu	ure:		Date:		



FINANCE CONTACT

Please pro	ovide the best contact for finance handling if different to applicant contact:
Contac Name	
Ema	il: Telephone:
PRIVACY	Y POLICY & COMMUNICATIONS
Please tic	k to confirm you consent to the following:
	understand and accept that UKFT needs to store and use my personal information to process my application nd offer membership services.
Yo	our bank details will be held by our accounts department and will not be shared with any other parties.
	o view our Privacy Policy which informs you how we handle the information we obtain from you, lease visit www.ukft.org/privacy-policy
lo	confirm I have read and understood the UKFT Membership Terms and Conditions
1 ((and all colleagues listed) wish to subscribe to UKFT's e-newsletter and other bulletins
List of col	lleague names and email addresses:
WHERE	DID YOU HEAR ABOUT UKFT?
Tick all th	at apply
0	nline search - please share what you were searching for:
Re	ecommendation - please share who from:
Sc	ocial media - please share which platform:
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TEXTILE MEMBERSHIP APPLICATION