

Application Form for Membership

Please complete the form below so that we can process your application. Once you have submitted the form we will be in contact to discuss membership.

Organisation details
Organisation
Contact name
Email
Telephone
Correspondence address
Website
Invoice address (if different from above)
Brief details of organisation/services offered
Once you join we will be in contact to confirm your listings in the Members Directory and your introduction in Parking News
Company registration number
VAT number
Annual parking related turnover

Primary contact details				
Please supply details of the primary	contact for member	ership (if different j	from above)	
This person will be the main represe	entative for your or	ganisation in acces	ssing the membership benefits and	
will receive voting rights in membership elections, your account manager will be in contact to explain				
further.				
Name				
Email				
Telephone				
Mobile				
Secondary contact details				
To ensure we are keeping you up to date please supply secondary contact details.				
Please confirm they are happy to receive regular e-zine updates and Parking News.				
Name				
Email				
Telephone				
Communications	Ezine F	Parking News	Ezine Parking News	
Address (if different from				
above)				
,				
Membership fees				
Please click here to view the membership fees.				
Fees are based on the parking related turnover from the latest full financial year.				
rees are based on the parking related turnover from the latest rail infancial year.				
Membership classification applie	ed for	Overseas Public Sector Private Sector		
*delete as appropriate		e verseus fr. dame sector fr. rivate sector		
Banding applied for *delete as appropriate		One Two Three Four Five Six		
Payment Methods				
		Cheque Credit	/Debit Card Direct Debit Invoice	
*delete as appropriate				
Purchase order number				
The following card types are accepted, please tick as appropriate				
Visa JCB Mastercard Switch Delta				
(We regret we cannot accept any other card types.)				
Card No.:				
Valid from:				
Valid to:				
If you wish to pay by direct debit please complete the <u>direct debit form</u> with an original signature				
and return.				
Please make cheques payable to: British Parking Association				
Direct debit forms or cheques should be posted to the address at the bottom of the application.				

Data protection				
The personal information you have provided will help us to deliver, develop and disseminate our				
products and services. Submitting your details indicates that you have read and agree to our				
Privacy Policy. Please read this to access your data rights.				
Please tick to confirm you have read to privacy policy				
Confirmation				
BPA members are required to abide by the <u>Memorandum and Articles of Association</u> and <u>Code of</u>				
<u>Professional Conduct of the BPA</u> and to promote its objectives to the best of their ability.				
By submitting your application, you agree to the above and confirm that the information you have				
provided is complete and correct.				
Signed				
Date				
Approved Operator Scheme applicants ONLY				
There is a further application process for organisations that are involved in enforcement on				
private land that wish to become a member of the Approved Operator Scheme (AOS)				
If this is applicable to your organisation, please confirm below that you wish to apply to become a				
member of the AOS.				
You will be required to comply with the <u>BPA Code of Practice</u> for enforcement on private land, be				
taken through a compliance process and, additional membership fees will be applicable.				
I am also applying for AOS membership				
Completed forms				
Completed forms can be emailed to membership@britishparking.co.uk or posted to				
British Parking Association				
Chelsea House				
8-14 The Broadway				
Haywards Heath				
West Sussex				
RH16 3AH				