



Full Membership Application Form

For special category memberships please see our website www.ctauk.org

Any queries please call 0161 351 1475 or email membership@ctauk.org

PLEASE COMPLETE IN BLOCK CAPITALS

ABOUT YOUR ORGANISATION

| | |
|----------------------------|--|
| Name of organisation | |
| Address | |
| Postcode | |
| Telephone | Fax number |
| Main email address | |
| Total number of paid staff | Total number of volunteer hours per week |

Is your organisation a registered charity / a company limited by guarantee / a CIC / an IPS / Unicorporated?
(Please circle all that apply and give registration details)

Is transport your primary purpose? Yes/No If not, what is your primary purpose

Number of individual passenger trips per annum? Number of vehicles owned/operated by the organisation?

If your organisation has members, how many members do you have? Groups Individuals
(Please give approximations if exact numbers are not available)

Annual turnover of your organisation in the last financial year

| | | | | | |
|----------------------|--------------------------|----------------------|--------------------------|----------------------|--------------------------|
| Less than £25,000 | <input type="checkbox"/> | £25,000 to £50,000 | <input type="checkbox"/> | £50,000 to £100,000 | <input type="checkbox"/> |
| £100,000 to £150,000 | <input type="checkbox"/> | £150,000 to £250,000 | <input type="checkbox"/> | £250,000 to £500,000 | <input type="checkbox"/> |
| £500,000 to £1m | <input type="checkbox"/> | More than £1m | <input type="checkbox"/> | | |

DETAILS OF MAIN CONTACT PERSON

| | | |
|------------|---------------|-------|
| First name | Surname | Title |
| Job title | | |
| Telephone | Email address | |

MEMBERSHIP CATEGORY THAT YOU WISH TO APPLY FOR

Please tick

| | <i>Full price</i> | <i>Direct debit price</i> |
|---|----------------------------------|----------------------------------|
| Full Membership Band 1 for organisations with annual turnover less than £150,000 | £76.00 <input type="checkbox"/> | £72.20 <input type="checkbox"/> |
| Full Membership Band 2 for organisations with annual turnover between £150,000 and £500,000 | £198.00 <input type="checkbox"/> | £188.10 <input type="checkbox"/> |
| Full Membership Band 3 for organisations with annual turnover in excess of £500,000 | £295.00 <input type="checkbox"/> | £280.25 <input type="checkbox"/> |
| Public Sector Membership for all public sector bodies | £295.00 <input type="checkbox"/> | £280.25 <input type="checkbox"/> |

SEE OVERLEAF FOR PAYMENT DETAILS

FURTHER INFORMATION

If you do not wish to receive additional general information from the CTA tick here

If you do not wish to receive information from suppliers on relevant products and services tick here

| | | |
|-----------|------------|------|
| Signature | Print name | Date |
|-----------|------------|------|

RETURN YOUR COMPLETED APPLICATION FORM TO THE CTA MEMBERSHIP TEAM, HIGHBANK, HALTON STREET, HYDE, CHESHIRE SK14 2NY OR FAX TO 0161 351 7221.

Remember the CTA offers special membership categories for small community groups, education transport providers, the care sector, faith groups and youth groups. See our website www.ctauk.org for details or call the membership department on 0161 351 1475.

PLEASE TICK YOUR PREFERRED METHOD OF PAYMENT

Direct Debit with an annual 5% discount (please fill in the direct debit form below)

Cheque (Payable to CTA UK, ensure your organisation name is written on the back and post it to us with this application form)

Credit/Debit Card (please fill in the details below)

CREDIT/DEBIT CARD

Card Number

Valid from

Expiry date

Issue number

Security code

Cardholder name Telephone number

Please tell us how you heard about the CTA

For CTA official use only
CTA number
Date received
Slip
Database



Instructions to your Bank or Building Society to pay by Direct Debit

Return your completed application form to The CTA Membership Team, Highbank, Halton Street, Hyde Cheshire, SK14 2NY or fax to 0161 351 7221



The Manager Bank/Building Society

Address

Postcode

Name(s) of Account Holder(s)

Bank/building society account number

Account number boxes

Branch sort code

Branch sort code boxes

Reference number (for CTA use only)

Reference number boxes

Originator's identification number

6 7 0 5 2 6

For CTA official use only (this is not part of the instruction to your bank or building society)

Instructions to your bank or building society: Please pay Community Transport Association UK direct debits from the account detailed in this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that the instruction may remain with the CTA and, if so, details will be passed electronically to my bank/building society.

Signature 1 Date

Signature 2 (if required)

Banks and building societies may not accept direct debit instructions from some accounts

This guarantee should be detached and retained by the payer The Direct Debit Guarantee



- This Guarantee is offered by all banks and building societies that take part in the Direct Debit Scheme. The efficiency and security of the Scheme is monitored and protected by your own bank or building society.
- If an error is made by the CTA or your bank or building society, you are guaranteed a full and immediate refund from your branch of the amount paid.
- You can cancel a Direct Debit at any time by writing to your bank or building society. Please also send a copy of your letter to the CTA.
- If the amounts to be paid or the payment dates change, the CTA will notify you 10 working days in advance of your account being debited or as otherwise agreed.