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MEMBERSHIP APPLICATION FORM

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| **Your Name** |  |
| **Business Name** |  |
| **Company Address** |  |
| **Landline Telephone Number** |  |
| **Mobile Number** |  |
| **Email**  |  |
| **Website Address** |  |

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| **Primary Business Category Requested** |  |
| **Secondary Business Category Requested** |  |

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| **How many years have you been with this business?** |  |
| **What is your position within the business?** |  |
| **Please detail your own Professional Qualifications in relation to the business category required, if applicable** |  |

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| **How did you hear about BTR membership? [for BTR marketing purposes]** |  |

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| **What is the main reason you want to join BTR and what are you hoping to get out of the networking group?** |  |

Please return the form by email to the Membership co-ordinator, Lou Fletcher - lou@piccoloproperty.co.uk

Following your application, members will be asked to approve your membership to ensure there will be no business conflicts.

Following approval, you will be asked to submit a current photo and brief resume of yourself.