

# ASSOCIATION OF FIDUCIARY SERVICE PROVIDERS LIMITED

## APPLICATION FOR MEMBERSHIP

NAME OF COMPANY:

ADDRESS:

  
  
  

TELEPHONE:

FAX:

E-MAIL:

DESCRIPTION OF  
BUSINESS:  
(fifteen words or less please)

NO. OF EMPLOYEES:

NAME OF COMPANY'S  
REPRESENTATIVE:

NAME OF COMPANY'S  
ALTERNATIVE  
REPRESENTATIVE (if any):

We hereby apply for membership of the Association of Fiduciary Service Providers Limited and agreed to be bound by the Memorandum & Articles of Association of the Company.

We hereby undertake to contribute an amount not exceeding £1 to the assets of the Company in the event of it's being wound up while we are a member or within one year of us ceasing to be a member.

Signed: .....

Dated: .....