



# Membership Application

Name: .....

Position: .....

Company: .....

Address: .....

.....

..... Post Code: .....

Tel: ..... Fax: .....

Email: ..... Web: .....

Nature of Business: .....

Number of Years Trading: ..... Number of Employees: .....

Company Status (Limited/Plc/Partnership): .....

Company Number: .....

Annual Turnover: .....

Percentage of turnover that is controls related: .....

Signature: ..... Date: ..... /Over

**CONTACT:**

**Karen Fletcher**

.....  
Email: [bcia@feta.co.uk](mailto:bcia@feta.co.uk)

Two recent clients who may be approached for reference:

Company (1): .....

Contact: .....

Position: .....

Address: .....

.....

.....

Post Code: ..... Tel: .....

Company (2): .....

Contact: .....

Position: .....

Address: .....

.....

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Post Code: ..... Tel: .....

**Note:**

Please return this form with any supporting information,  
such as company brochure(s), end of year accounts, etc, to:

*Karen Fletcher, Executive Officer, BCIA*

*2 Waltham Court*

*Milley Lane*

*Hare Hatch*

*READING*

*RG10 9TH*

