

Membership Registration Form

I wish to become a member of Butchery Excellence International and hereby allow the below details to be used in line with my membership agreement

Section 1: Personal details

1. Your details

(a) Name:

(b) Business Name:

(c) VAT Number:

(d) Website:

2. Contact details

(a) Telephone number:

(b) Email address:

(c) Address 1:

(d) Address 2:

(e) Town:

(f) County:

(g) Postcode:

3. Business Details

(a) Are you a sole trader, partnership or Ltd company?

(b) Number of outlets:

(c) Directors / Partners (Name):

(d) Number of Directors / Partners:

(e) Number of Employees:

4. Additional information:

Please tick which of the following you provide:

Butchery Hot Deli Cold Deli

Retail Packs Wholesale Other (Please Specify)

Other: _____

Section 2: Memberships

New Members

Membership	Size of Shop	Fee per Annum (GDP + VAT upfront)	Fee per Annum (direct debit GDP + VAT)	Fee per Month (direct debit GDP + VAT)
Plan 1	Less than 2 employees	£350	£200	£33.54
Plan 2	3 – 10 employees	£750	£700	£71.87
Plan 3	Over 10 employees	£950	£900	£91.04
Plan 4	BEI Membership with no visits. International countries outside UK / Ireland	£200	£150	N/A
Plan 5	Associate / Retired Membership	£100	N/A	N/A

(a) ROI customers pay memberships to euro equivalent. Multiple site membership fee costs and EC plant customers are welcome, fees are to be negotiated with Chief Executive.

Section 3: Payment Options

6. New Payments

Please tick the method in which you would like to pay:

Cheque Bacs Debit Card

7. Cheques

All cheques to be made payable to: Montgomery Food Consulting.

8. BACS

Note: All BACS payments must include your name in the reference section

Euro Account

(d) Sort Code:

90 – 34 – 88

(e) Account Co:

62640484

(f) IBAN:

IE02 BOFI 9034 8862 640484

(g) BIC:

BOFIE2D

Sterling Account

(d) Sort Code:

90 – 49 - 74

(e) Account Co:

84925675

(f) IBAN:

GB93 BOFI 9049 7484 925675

(g) BIC:

BOFIGB2B

9. Debit Cards

(a) Card Number:

(b) Name on Card:

(c) Valid From:

(d) Expiry Date:

(e) Security Code: (3 digits on back)

Payment Confirmation:

Signed:

Date:

Office Use Only:

Signed:

Date:

Section 4: Disclaimer and Signature

I certify that the above information is correct to the best of my knowledge and understand that any false or misleading information, if proved, may result in no further action being taken on this application, or, if appointed, dismissal from the service of Butchery Excellence International. I also certify that the council will process and retain this application form under the provisions of the Data Protection Act 1998.

Signed:

Date: