

APPLICATION FOR MEMBERSHIP

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| **Name of**  **Organisation** |  | | | | | |
| **Invoice Address**        **Postcode** |  | | | | | |
| **Telephone** |  | **Email** |  | | | |
| **Number of Vessels**  ***(Where Applicable)*** |  |  | **Number of Marine Based Employees**  ***(Where Applicable)*** | | |  |
| **Membership**  ***(Tick one option only)*** |  | **Employer Member** | |  | **Affiliate Member** |  |

We, the above organisation, wish to apply to become a Member (category identified above) of the Thames Skills Academy Limited (the Company) and in accordance with the Company’s Articles of Association hereby apply to be admitted as a Member and to be subject to the provisions of the Articles of Association and agree to comply with and uphold the Company’s Charter & Code of Ethics.

We acknowledge that the Membership Fees for the period **1 April 2022 to 31 March 2023** are:

**Annual Employer Membership:**

Full Employer Member **£5,000**

Micro Employer (turnover less than £200,000) **£1,000**

**Annual Affiliate Membership:**  **£3,000** (*Minimum 3-year sponsorship*)

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| --- | --- | --- | --- |
| **Name** |  | **Date** |  |
|  |  |  |  |
| **Job Title** |  |  |  |
|  |  |  |  |
| **Signature\*** |  | | |

\* *Authorised signatory for and on behalf of the applicant*.

Please email this completed form to admin@thamesacademy.london. An invoice will be issued once your membership has been approved.