



APPLICATION FORM

BCO Membership

Please complete all relevant sections of this form and return it to:

Richard Kauntze, Chief Executive
British Council for Offices
78-79 Leadenhall Street, London EC3A 3DH

OR

Email: membership@bco.org.uk
Fax: 020 7626 1553

For further information about membership visit www.bco.org.uk/membership/joinus or call 020 7283 0125.

If your application is successful, you will be informed by email and an invoice for your annual subscription will be issued at this time.

Full name : _____

Organisation : _____

Address : _____

Postcode : _____

Telephone : _____ Fax : _____

Email : _____ Website : _____

Position in organisation : _____

Qualifications : _____

If your invoice requires a different address <i>please enter here</i>	

Postcode	
Email :	<i>(this must be a generic accounts email address eg. accounts@BCO.org.uk)</i>

If any of your colleagues would also like to join the BCO please provide names and e-mail addresses in the space below and we will send them an application form. Separate forms need to be completed for each member application.

To ensure it reflects the varied interests of the office sector, the BCO segments membership into different categories. Please indicate which category best describes the principal activities of your ORGANISATION **

(please tick ONE box only)

- | | | |
|--|-----------------------------------|---|
| <input type="radio"/> Facilities Management | <input type="radio"/> Agency | <input type="radio"/> Public Sector |
| <input type="radio"/> Architecture & Interior Design | <input type="radio"/> Legal | <input type="radio"/> Quantity Surveying & Cost Control |
| <input type="radio"/> Construction & Office Fitting | <input type="radio"/> Occupier | <input type="radio"/> Property Management |
| <input type="radio"/> Ownership/Investment | <input type="radio"/> Development | <input type="radio"/> Town Planning |
| <input type="radio"/> Education/Charity | <input type="radio"/> Valuation | <input type="radio"/> Project Management |
| <input type="radio"/> Engineering & Technical Services | <input type="radio"/> Research | <input type="radio"/> Other Business Services* |

*If you picked 'Other Business Services', please give details of your organisation's principal activity:

**If the primary function of your organisation is different from your own specialisation, please also give details of your role:

TYPE OF MEMBERSHIP & SUBSCRIPTION RATES

PRINCIPAL MEMBERSHIP (<i>London and the South East</i>) *	£970	<input type="checkbox"/>
INDIVIDUAL MEMBERSHIP (<i>London and the South East</i>) *	£220	<input type="checkbox"/>
PRINCIPAL MEMBERSHIP (<i>Regional</i>) *	£815	<input type="checkbox"/>
INDIVIDUAL MEMBERSHIP (<i>Regional</i>) *	£190	<input type="checkbox"/>
PRINCIPAL MEMBERSHIP (<i>SME – 20 Employees or fewer</i>) *	£520	<input type="checkbox"/>
INDIVIDUAL MEMBERSHIP (<i>SME – 20 Employees or fewer</i>) *	£190	<input type="checkbox"/>
NEXTGEN MEMBERSHIP (<i>35 years of age or under</i>) *	£120	<input type="checkbox"/> Date of birth: / /
SOLE PRACTITIONER MEMBERSHIP	£220	<input type="checkbox"/>
CENTRAL / LOCAL GOVERNMENT MEMBERSHIP	£140	<input type="checkbox"/>
EDUCATION / CHARITY MEMBERSHIP	£140	<input type="checkbox"/>
OCCUPIER MEMBERSHIP	£140	<input type="checkbox"/>
INTERNATIONAL MEMBERSHIP	£220	<input type="checkbox"/>

Subscription rates are subject to VAT.

* The first representative from an organisation should be the 'Principal' Member. Further members to join from the same organisation are classified as 'Individual' members. Please indicate which type of membership you would like to apply for by ticking the appropriate box.

Please do **NOT** send any fees with this form – we will invoice you in due course.

SPONSORSHIP

Your application must be sponsored by a current member of the BCO either from your own, or a different organisation. Please provide the following details:

Sponsor Name (BLOCK CAPITALS)

Sponsor Membership no.

Sponsor Company Name

Sponsor Signature

Date :

APPLICANT'S STATEMENT

I/we understand that the BCO may, at its discretion, refuse application for membership.

I/we, if elected, agree to pay all appropriate fees and to abide by such by-laws and regulations as the BCO may from time to time determine.

Name (BLOCK CAPITALS) :

Signature :

Date :

By joining the BCO, you will be opting in to receive email communications from us with regards to BCO Research and Events but you can unsubscribe to these at any time.