



2017-2018 SIGB Full Membership Application

There are 3 categories of SIGB Membership - Full, Retail and Travel.

This form should be completed by those applying for **Full** (or Provisional) SIGB Membership.

All relevant sections of this application form must be completed and returned to SIGB with your completed direct debit mandate.

All applications will be considered by the SIGB Committee and, immediately following ratification, membership details will be forwarded. The membership year runs from 1 May to 30 April.

Company Name: _____

Contact: _____

We, the undersigned wish to apply for membership of Snowsport Industries of Great Britain (SIGB) in the following category:

A. Full Membership

We understand that in order to qualify for membership:

1. We must operate a commercially viable business in the manufacture and/or distribution of snowsports product in Great Britain and supply more than **10** retail outlets.
2. We must have been involved in the Snowsport Trade for a minimum of one year.
3. We must give two referees who are full members of the SIGB or, if unable to supply referees, we will supply a letter detailing the background and extent of our business.
4. We enclose a Direct Debit Mandate for payment of £100 annual subscription.
NB Any changes to membership rates will take place at the AGM prior to the subsequent membership year.
5. We agree that, if we are admitted to SIGB, we will abide by the rules of the constitution.

B. Provisional Membership

For companies who do not qualify for Full Membership, there is the option of a one year Provisional Membership, subject to the following terms.

1. We must operate a commercially viable business in the manufacture and/or distribution of snowsports product in Great Britain.
2. We are planning to enter the snowsport trade (new companies or products).
3. We will supply a letter detailing the company background and business intentions.
4. We enclose a Direct Debit Mandate for payment of £100 annual subscription.
NB Any changes to membership rates will take place at the AGM prior to the subsequent membership year.
5. We agree that, if we are admitted to SIGB, we will abide by the rules of the constitution.
6. Provisional members will have no voting rights at AGM or EGMs and will not be listed as members.
7. Provisional membership lasts for one year, after which time Full Membership should be sought.

**Annual Membership Fee
£100**

Direct Debit
Mandate enclosed



Signed _____

Referees Please provide the names of two SIGB Full Members who are willing to support your application

Proposer _____ **Company** _____

Seconder _____ **Company** _____

• Completed application together with completed Direct Debit Mandate should be sent to SIGB, 3 Coalhill, The Shore, Edinburgh, EH6 6RH.

• All applications will be considered by the SIGB Committee and, immediately following ratification, membership details will be forwarded.

Office use

Direct Debit Referees check Date accepted _____



Contact Details

1. Contact Responsible for overseeing your company's membership of SIGB, distribution of SIGB information to appropriate staff etc.

Contact Name

Position

2. Company Information

Company Name

Note that you must have the legal right to use this name. Please indicate which name you wish to be your official membership name for listings etc. Tick one box.

Trading As Name

Address

Post Code

Tel No.

Fax No.

Email

Web site

Type of Business Sole Trader Partnership Limited Company No. of years in Snowsport Business

Nature of Business Importer Distributor Manufacturer Agency

Other

3. Additional Contact Names For specific function areas if different to main contact

Name	Title
SLIDE/ Shows <input type="text"/>	<input type="text"/>
Finance/Credit <input type="text"/>	<input type="text"/>
Sales <input type="text"/>	<input type="text"/>
Marketing <input type="text"/>	<input type="text"/>
PR <input type="text"/>	<input type="text"/>
Advertising <input type="text"/>	<input type="text"/>
Sponsorship <input type="text"/>	<input type="text"/>
Distribution <input type="text"/>	<input type="text"/>

4. Additional Information, Distributor Members

Brand names or services that you currently supply to the trade (please continue on separate sheet if necessary)

Brand Name/Service	Type of product/service
1 <input type="text"/>	<input type="text"/>
2 <input type="text"/>	<input type="text"/>
3 <input type="text"/>	<input type="text"/>
4 <input type="text"/>	<input type="text"/>
5 <input type="text"/>	<input type="text"/>
6 <input type="text"/>	<input type="text"/>
7 <input type="text"/>	<input type="text"/>
8 <input type="text"/>	<input type="text"/>