



APPLICATION FOR MPQC MEMBERSHIP (Print or Type)

NAME OF COMPANY: _____

ADDRESS: _____

_____ **POST CODE:** _____

TELEPHONE NO: _____ **FAX NO:** _____

EMAIL ADDRESS: _____ **WEBSITE:** _____

CONTACT NAME (s): _____ **POSITION:** _____

On behalf of the above organisation, I wish to apply for Membership of MPQC [refer to Article 14 of the Memorandum & Articles of Association - enclosed] at a cost per head of employee as outlined on the attached schedule.

TOTAL NUMBER OF EMPLOYEES AS AT 1ST JANUARY: _____

(see Membership Fees for definition of employees)

On behalf of the above organisation I agree to abide by the Memorandum & Articles of Association and any regulations or rules pertaining to MPQC. I confirm I am the Industry Representative for the above organisation.

SIGNED: _____ **DATE:** _____

NAME: _____ **JOB TITLE:** _____

When completed, please return to:

Membership Secretary

Mineral Products Qualifications Council

Alban Row, 27-31 Verulam Road, St. Albans, Herts. AL3 4DG

Tel. No. 01727 869008 Fax. No. 01727 843318 Email: info@mpskills.co.uk Website: www.mp-qc.org

Office Use Only:

Date Received:	Date Forwarded to GM:	Outcome:	Board Advised:
Membership No.		Certificate No.	Date Sent:

MPQC MEMBERSHIP FEES

No. of Employees	£
Minimum Invoice Value	250
1-499	£13 per head
500-999	£12 per head
1,000 +	£11 per head

Plus VAT at the national rate prevailing at the point of invoice.

Definition of Employees:

All employees within your organisation (full and part-time employees) are included regardless of job role or whether they are based in an office or at the headquarters. The only employees who can be excluded are those covered by the scope of another statutory body e.g. CITB.