









Supporting the Coppice Industry

Membership Application and Renewal

Geographical Area(s): Membership Type: (Reg. Group / Business - min 5 members / employees. Fewer than 5, join Holding Group) Membership Membership Legal status: Informal	Group / Business /						
Membership Type: (Reg. Group / Business - min 5 members / employees. Fewer than 5, join Holding Group) Business Organisation Informal Constituted Co-operative Ltd Co. CIC Charity Other (please describe): Address:	Organisation Name:						
Regional Group Business - min 5 Business Business Constituted Co-operative Ltd Co. CIC Charity Cother (please describe): Address:	Geographical Area(s):						
than 5, join Holding Group) Business	(Reg. Group / Business - min 5 members / employees. Fewer	Regional Group		Holding Group			
Legal status: Ltd Co. CIC Charity Other (please describe): Address: Postcode: Tel: Email: Website: Social Media 1: Social Media 2: Social Media 3: Membership Please provide names and contact details of 5 current members of your group / business / organisation below. If you are a group of fewer than 5 you may use this section to give contact details for those who would like to join the Holding Group. If your group / business has more than 5 members / employees and appoints someone to keep records, it is sufficient to give their details in the bottom section here. Name: Contact: Name: Contact: Contact: Name: Contact: Contact: Name: Contact: Contact: Name: Contact: Contact: Name:		Business		Organisation			
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Name of person in Group / Business keeping records:	Name:	Contact:					
	Name:	Contact:					
Tel: Email:	Name of person in Group / Business keeping records:						
	Tel:	Email:					

Group Representative – person appointed by the Group / Business to receive correspondence, attend and participate in General Meeting and vote on behalf of the Group. (New applicants / members changing Group Rep please also give additional details in green sections below)					
Name:					
Tel:		Email:			
Address:					
		Postcode:			
Brief summary of no	minee's background & potention	al contribution as Group Rep:			
I confirm that I am w	villing to be nominated as NCFe	d Group Representative:			
Signed:		Date:			
We would like to nominate the above for the position of NCFed Group Representative and					
hereby confirm that they have the endorsement of the local group/network.					
1 st Nominee		2 nd Nominee			
Name:		Name:			
Signed:		Signed:			
Position:		Position:			
Date:		Date:			

Subscription Fee (Due from	Fee Payable:		
Coppice Group	Basic Fee (5 memb		
Total Number of members :	plus £4 per member above in basic fee, up to a total ma		
Holding Group Members, for those in areas with no group and less than 5 joining:	No. Members:	£10 per person	
Business Membership	No. Employees:	£200	
Affiliated Organisation:	£40		

Payment of subscription fees may be made by **bank transfer** using the bank details below. Please add a reference to the payment so that we can identify your group. Bank: **Cooperative Bank**. Account Name: **National Coppice Federation**. Sort code: **08-92-99**. Account number: **65716928**

Payment may also be made by cheque payable to 'National Coppice Federation' and returned to the following address with this form. NCFed Membership Secretary, Glyn Afon, Brynrefail, Caernarfon, Gwynedd, LL55 3NR

NCFed will list member groups on our website – www.ncfed.org.uk - and include contact details of the group representatives. Details of NCFed's policy for handing personal data within the requirements of the General Data Protection Regulation may be requested from secretary@ncfed.org.uk

For all other matters relating to NCFed Membership issues, please contact membership@ncfed.org.uk