

# THE NATIONAL ASSOCIATION OF GOLDSMITHS

## AFFILIATE MEMBERSHIP APPLICATION FORM



Please complete this form in BLOCK CAPITALS and continue on a separate sheet where necessary.  
Please see notes attached to help you complete this form.

**Affiliate category:**

(Please choose one of the categories from the list supplied with this form) \_\_\_\_\_

1. **Trading Name of Business:** \_\_\_\_\_  
Sole Trader  Partnership  L.L.P.  Company (Ltd)  P.L.C.

**Description of Business:** \_\_\_\_\_

**Company Name:** \_\_\_\_\_

**Company Registration Number:** \_\_\_\_\_ **VAT Number:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Post Code:** \_\_\_\_\_

**Telephone Number:** \_\_\_\_\_ **Fax Number:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_ **Web Page:** \_\_\_\_\_

2. **Full name of person applying (primary contact name for us to use in communications):**  
\_\_\_\_\_  
Proprietor  Partner  Director  Company Secretary

3. **Full Names of all Proprietors/Partners/Directors (other than that given above):**  
\_\_\_\_\_

4. **Please name any company with substantial measure of control in the above business and the ultimate controlling company:**  
\_\_\_\_\_

5. **Please state any connections between the Proprietor, Partners or Directors in any other jewellery business within the last five years:**  
\_\_\_\_\_

6. **Has applicant previously applied for membership?** Yes  No   
**If yes, please give brief details:** \_\_\_\_\_

7. **Date business established:** \_\_\_\_\_

8. **Date acquired by applicant:** \_\_\_\_\_

9. **Previous trading name(s):** \_\_\_\_\_

10. **Full name(s) of previous Proprietors/Partners/Directors:**  
\_\_\_\_\_

11. **Number of shops:** \_\_\_\_\_

(If more than one please provide a separate list of all branches along with trading names if different, address, phone & fax numbers, email, name of contact at each branch, current photos of each branch and any other relevant details.)

12. **Total number of employees including working principals, office, sales and workshop staff in all branches:**

Full time \_\_\_\_\_ Part time \_\_\_\_\_ (working less than 20 hours)

13. **An N.A.G. member has a commitment to education and training throughout their business. Please list any industry related and other relevant qualifications currently possessed within your business.**

Name	Position	Qualification(s)	Year Achieved
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

14. **In addition to any statutory employee insurance required, does the applicant hold other insurance?**

Jewellers Block Policy Yes  No   
Cover for customer's goods while in your care (for repairs, valuations etc.) Yes  No

Name of broker/company you are insured with: \_\_\_\_\_

15. **Do you use a computer for any of the following:**

Stock management  Accounts  Valuations  Internet/email  Other

16. **Please tick a box to indicate the approximate average value of your stockholding (at cost, excluding VAT):**

Under £25,000  £25,000-£49,999  £50,000-£99,999  £100,000-£249,999  £250,000-£499,999  Over £500,000

17. **Please tick a box to indicate your approximate total turnover per annum (excluding VAT):**

Under £75,000  £75,000-£249,999  £250,000-£1,000,000  Over £1,000,000

18. **Please indicate the approximate proportion in value terms of your stockholding:**

Diamond set jewellery	%	Costume jewellery	%
Other gem set and pearl jewellery	%	Watches	%
Platinum jewellery	%	Clocks	%
Gold jewellery (18ct and above)	%	Silverware	%
Gold jewellery (9ct and 14ct)	%	Gifts	%
Silver jewellery	%	Other	%

19. **Of your stockholding, how much is antique or second hand?**

Jewellery \_\_\_\_\_% Watches \_\_\_\_\_% Other \_\_\_\_\_%

20. **If you sell new watches, please name your three most important brands for which you have agencies:**

1) \_\_\_\_\_ 2) \_\_\_\_\_ 3) \_\_\_\_\_

21. Please indicate the approximate proportion in value terms of your turnover:

Jewellery	%	Gifts	%
Watches	%	Commissions	%
Clocks	%	Repairs	%
Silverware	%	Valuations	%

22. Do you provide a:

	On premises	Contracted out	No
Jewellery repair service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Watch repair service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Design service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Special order service to make jewellery	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Valuation service	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

23. If you are a specialist in another relevant area (e.g. antique jewellery restoration, antique silver, clock repairs etc.) please give brief details:

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24. Which of the following industry events have been attended within the last 2 years? (tick all relevant boxes)

N.A.G. AGM	Principals <input type="checkbox"/>	Staff <input type="checkbox"/>	Basle Fair	Principals <input type="checkbox"/>	Staff <input type="checkbox"/>
N.A.G. Valuers' Conference	Principals <input type="checkbox"/>	Staff <input type="checkbox"/>	NEC Spring Fair	Principals <input type="checkbox"/>	Staff <input type="checkbox"/>
IJL Earls Court	Principals <input type="checkbox"/>	Staff <input type="checkbox"/>	Vicenza (I, II or III)	Principals <input type="checkbox"/>	Staff <input type="checkbox"/>

Please list any others: \_\_\_\_\_

25. Which jewellery industry publications do you read regularly?

The Jeweller     Retail Jeweller     Goldsmiths' Review     Journal of Gemmology

Please list any others: \_\_\_\_\_

26. Does the Applicant belong to any other Associations (eg. BJA, NPA), Buying Groups, or relevant bodies (eg. Chamber of Commerce) or committees? If so please state name and period of membership:

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27. Please indicate the principal reason(s) the Applicant wishes to join the N.A.G.:

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28. Trade references are required from two of the main jewellery industry suppliers with whom the applicant has dealt with regularly. Please give the following details to whom we may refer:

Contact name	Supplier	Address
_____	_____	_____
_____	_____	_____

29. A Bank Reference can be obtained from:

Bank: \_\_\_\_\_ Branch: \_\_\_\_\_ Contact name: \_\_\_\_\_

Address: \_\_\_\_\_

**TO THE BOARD OF DIRECTORS**

- I/We hereby apply to be admitted to Affiliate status of the National Association of Goldsmiths of Great Britain and Ireland, subject to the Memorandum and Articles, and the Bye-Laws of the said Association.
- I/We understand that the Association's Affiliate status is for non-voting membership and that I am not entitled to hold any office in the Association or to vote in any meetings of the Association.
- I/We approve and promise to observe the conditions of non-voting membership, Bye-Laws and Codes of Practice as laid down by the Association, as from time to time amended.
- I/We fully understand that non-voting members are expressly forbidden to use the Association's Grant of Arms nor to use any words, written or implied, which indicate they are a Member of the Association or make reference to their involvement with the Association.
- I/We agree to pay an annual subscription for my Affiliate status at the rate set from time to time by the Board of Directors of the Association, payable by direct debit on the 1<sup>st</sup> January each year.
- I/We understand that if any information is found to be incorrect after Affiliate status has been granted, after due consideration, the Association may decide that the applicant's status should cease forthwith or that it might not be renewed after the current subscription period has ended.

**Note:**

It is a requirement of non-voting membership of the Association that you disclose all criminal convictions (apart from spent convictions). If you are aware that you are or have been subject of a Police investigation, then you must also disclose this to the N.A.G., even if this does or did not lead to you being prosecuted.

If you commit or are found to have committed an act of fraud or dishonesty (whether or not giving rise to legal proceedings), are convicted of a criminal offence or fail to disclose a criminal offence to the N.A.G., then your application for Affiliate status may be refused or your status may be terminated with immediate effect.

**I/We enclose:**

- This form duly completed along with \_\_\_\_\_ continuation sheets (state number).   
(We strongly advise that you keep a copy.)
- The Association's Code of Practice duly signed and dated.
- Our completed Direct Debit mandate.
- Recent clear colour photographs of our shop front and of each branch shop front where appropriate.

**DECLARATION: I certify the information stated in this application form is accurate and complete in all respects.**

Signature: ..... Date: .....

**PLEASE RETURN THIS FORM TO: The National Association of Goldsmiths, 78a Luke Street, LONDON EC2A 4XG  
(T) 020 7613 4445 (F) 020 7613 4450 (E) membership@jewellers-online.org**

*We may send you information about other products the N.A.G. believes will be of benefit to members.*

*Data Protection Act 1998: Please tick this box if you DO NOT want the N.A.G. to contact you by mail.*

*Privacy & Electronic Communications Regulations 2003: Please tick this box if you DO NOT want the N.A.G. to contact you by email.*