

THE NATIONAL ASSOCIATION OF GOLDSMITHS

ALLIED 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.

Allied category:

(Please choose one of the categories listed below) _____

Allied categories: being persons who are bona fide businesses within the jewellery and/or allied industry who exclusively trade on a business to business basis.

- | | |
|----------------------------|---|
| 1. Diamond Cutters | 9. Manufacturers |
| 2. Diamond Merchants | 10. Mounters, Setters and Polishers |
| 3. Lapidaries | 11. Trade repair specialists (jobbers, engravers, watchmakers etc.) |
| 4. Stone Dealers | 12. Importers |
| 5. Pearl Dealers | 13. Wholesalers |
| 6. Recognised Laboratories | 14. Ancillary Suppliers |
| 7. Bullion Dealers | 15. Agent |
| 8. Casters | |

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

Full time _____ Part time _____ (working less than 20 hours)

12. 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
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

13. 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: _____

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

Stock management Accounts Valuations Internet/email Other

15. 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

16. 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

17. Which jewellery industry publications do you read regularly?

The Jeweller Retail Jeweller Goldsmiths' Review Journal of Gemmology

Please list any others: _____

18. 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:

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

20. 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
_____	_____	_____
_____	_____	_____

21. 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 Allied 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 Allied 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 Allied status at the rate set from time to time by the Board of Directors of the Association, payable by direct debit on the 1st January each year.
- I/We understand that if any information is found to be incorrect after Allied 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 Allied 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.

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.