



Information required for new members

I confirm that the venue named below would like to join the Gloucester City Safe business crime reduction partnership

1.	Trading name or venue name	
2.	Address <i>[inc postcode]</i>	
3.	Phone Number	
4.	Venue Contact Name	
5.	Position in the Company	
6.	Email address	
7.	Full Company Name [or Parent Company or Group Name] if different from 1.	
8.	Company Registration Number	
9.	Will payment be made locally or via a Head Office? If via a Head Office please give the address that invoices should be sent to.	
10.	If payment made via Head Office please give a contact name [if known].	
11.	Purchase Order Number <i>[if required]</i>	
12.	Signed	
13.	Print Name	
14.	Date	

In order to process your application as quickly as possible, contact can be made directly to
Rich Burge, City Safe Manager on 07531 211439 or rich.burge@gloucestercitysafe.co.uk
to arrange personal collection