

SECTION A: Affiliate Details

Firm Name:

Company Number:

Your firm's registered
address:

Postcode:

Main Telephone No:

Website Address:

Contact Email:

Alongside your application, please provide a separate word document with a description of your firm to appear on your Directory Page, along with a list of email addresses of who you wish to be registered with us.

SECTION B: Contact Information (Who should we contact for queries on this application)

Name:

Position:

Email:

Phone Number:

Contact name and email address for person in your firm who will be responsible for your directory entry, if not yourself:

Name:

Email:

SECTION C: Declaration

We, the undersigned, hereby apply for our Strategic Partnership to the Association of Professional Compliance Consultants. We agree at all times to act with professional integrity and competence and not to do anything (or omit to do anything) that harms, or has the potential to harm, the APCC.

Signed on behalf of:

Signature:

Signature:

Print Name:

Print Name:

Position:

Position:

Date:

Date:

Signed on behalf of the APCC.

Signature:

Signature:

Print Name:

Print Name:

Position:

Position:

Date:

Date:

What happens next:

Upon receipt of a completed application form, an APCC acknowledgment will be issued.

Once we have all other information and documents required, the Board of Directors will consider your application. Following this you will receive confirmation of your membership status if approved.