



Application for Associate Membership (Corporate)

(open to companies and other corporate bodies)

Applicant organisation:

Contact name:

Position:

Address :

.....

..... **Post code:**

Telephone no. :

Email :

All applicants are requested to read and sign the accompanying Additional Notes on Application for Associate Membership (Corporate) before signing the declaration below.

If you need any help to fill in this form or would like any further information, please contact Caroline Burrell on 0131 557 6737 or at caroline.burrell@ewrasac.org.uk for further information.

Declaration :

I am a director / officer of the corporate body named above, authorised to apply on its behalf to the Directors to become an Associate Member of *Edinburgh Women's Rape and Sexual Abuse Centre* (the Company) under its Articles of Association.

We, the corporate body named above, are in agreement with the Objects of the Company and agree to be bound by the rules of the Company.

In the event that the Company is wound up we agree to pay a sum not exceeding £1.00 (one pound) towards meeting any outstanding debts of the Company.

Signed: Date:

Print name: Office held:

NB. No corporate body shall be admitted to be an Associate Member of the Company unless its application for membership is approved by the Directors. The Directors reserve the right to refuse membership in cases where they consider there are reasonable grounds for doing so.

Please return this form to:
The Company Secretary
EWRASAC
1 Leopold Place
Edinburgh
EH7 5JW

Registered Office:
c/o Maclay Murray & Spens LLP
Quartermile One
15 Lauriston Place
Edinburgh
EH3 9EP