

# Membership Application

## APPLICANT INFORMATION

Company Name

Trading Name *(if different)*

Company Registration Number

Registered Address

Postcode

Main Place of Business  
*(if different from registered address)*

Postcode

Telephone Number

Email

Website

## BRANCHES AND SUBSIDIARIES

Please include all Branch and/or Subsidiary addresses and contact information on pages 3 and 4 of this membership application form.

## MEMBERSHIP DETAILS

Main Contact

Email

Managing Director/CEO

Email

Training Manager

Email

HR Manager

Email

Accounts Email

Accounts Telephone No

## OWNERSHIP

Proprietor(s), Partner(s) & Director(s)  
(Please list full names and percentage of shareholding)

## HEADCOUNT

Membership subscription is based on the total number of operational staff including directors as well as sales, accounts, administration, and operations departments (excluding warehouse staff, drivers and packers).

Headcount excluding warehouse staff, drivers and packers

Total number of staff employed

## SUBSCRIPTION & APPLICATION FEE

An Application Fee is required with all applications. The Application Fee is non-refundable for unsuccessful applicants to cover the processing costs. Please contact the Membership department on 020 8844 3635 or at [membership@bifa.org](mailto:membership@bifa.org) to pay by Bank Transfer or Credit/Debit card.

On acceptance of membership a pro-rata subscription is charged for the remaining months of the calendar year. Thereafter, subscriptions are payable on 1 January each year. Subscriptions can be paid in two six monthly instalments by Direct Debit, or in full by Bank Transfer or Credit/Debit card.

**Note: BIFA does not accept bank charges for overseas Bank Transfers, the applicant must pay all bank charges.**

## DECLARATION

I/We declare that –

- a) We shall adopt and incorporate the current edition of the BIFA Standard Trading Conditions (STC) into international freight contracts.  
(Companies cannot use the BIFA Logo or Standard Trading Conditions until they have been accepted as members)
- b) We hold adequate insurance cover commensurate to our business activities and when required by BIFA, we shall produce evidence from our insurer/broker that the cover remains valid.
  - (1) **Freight Forwarder:** This is a fully comprehensive Insurance policy to meet the liabilities incorporated in the latest edition of the BIFA STC. The policy includes Loss or Damage and Errors and Omissions.
  - (2) **Customs Broker (non-forwarding):** This is a fully comprehensive Insurance Policy to cover Errors & Omissions.  
(Details of our existing cover are given in the Insurance Declaration of this membership application form).
- c) We undertake to accurately complete, sign and return the Annual Company Declaration that will be sent each year prior to receiving our Annual Membership renewal invoice.

Authorised Signatory

Name

Date

## PRIVACY NOTICE

By completing and signing this form you are applying for BIFA Membership, which is to join a trade association for UK-registered companies engaged in international movement of freight by all modes of transport. You can unsubscribe from BIFA newsletters at any time simply by following the unsubscribe link in any of the emails that we send you. We never share personal information with any organisation for third-party marketing purposes. For our contact details and other important privacy information please read our [privacy statement](#).

## BRANCHES AND SUBSIDIARIES

Company Name

Address

Postcode

Main Contact

Telephone Number

Email

Company Name

Address

Postcode

Main Contact

Telephone Number

Email

Company Name

Address

Postcode

Main Contact

Telephone Number

Email

**BRANCHES AND SUBSIDIARIES** *continued*

Company Name

Address

Postcode

Main Contact

Telephone Number

Email

Company Name

Address

Postcode

Main Contact

Telephone Number

Email

## INSURANCE INFORMATION

To be signed by the Insurer/Broker and Trading Company.

Company Name

BIFA Membership Number

### Important note

When arranging insurance cover, it is important that you discuss business commensurate with all activities being undertaken, with your insurer/broker, to ensure that you are adequately protected and do not simply opt for or rely on minimum levels of cover.

Contact BIFA Membership if you need assistance.

### Freight Forwarder

We confirm that the above-named company has arranged an insurance policy indemnifying them for liability arising in accordance with the British International Freight Association (BIFA) Standard Trading Conditions (STC) latest edition in respect of -

A. Loss of or Damage to goods

B. Errors and Omissions

### Customs Broker (non-forwarding)

We confirm that the above-named company has arranged an insurance policy indemnifying them in respect of -

A. Errors and Omissions

The information given below is only effective on the date of signing this document and does not guarantee that policy coverage will continue until the expiry date shown.

Name and address of Insurance Broker or Insurer

Insurer

Policy Number

Period of Insurance

From

To

This policy extends to cover the company to issue FIATA documents

Yes

No

Insurer / Broker:

Signed

Name

Date

Trading Company:

Signed

Name

Date