



APPLICATION FOR INDIVIDUAL MEMBERSHIP

NAME.....

ADDRESS.....

.....

Post Code Telephone No.....

Mobile No E-mail Address

Current Employer..... Date of Birth.....

Are you applying for membership independently or through your employer?

If applying independently, please supply two trade references with this application.

If you are applying through your employer please supply your Employer/Director's

Full Name Signature

Do you employ any staff?.....

How long have you been in Commissioning (or an allied field)?.....

Are you studying on any courses connected with building services? Y/N

If yes, give details.....

Have you previously or are you currently taking a CSA Distance Learning Course? Y/N

If yes, give details

What is your main objective in joining the CSA?.....

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Suggested Grade(This must be completed by a Manager/MD)

I enclose a fully detailed CV and apply for Individual Membership of the CSA and agree to abide by the Articles of the Association and the Code of Practice.

(Please email an electronic JPEG photograph for your identity card to office@csa.org.uk)

Applicant Signature..... Date:.....

(All Individual membership applications must be proposed and seconded by Manager/MD or CSA Corporate Member)

Proposed by: Seconded by:

Office Use Only:

Cheque Received.	Membership Form	Date	Type	Grade	Memb. No.	Cert. Issd.	I.D.Card Issd.
			Individual Member				