

## ASSOCIATE MEMBERSHIP APPLICATION

chapter affiliation: **United Kingdom**

please make cheque out for **£ 25.00**, payable to NEWH and mail/email to:

NEWH Membership, c/o Kevin Swart  
Arteriors, Chelsea Harbour Design Centre  
206 Design Centre East, Lots Road  
London SW10 0XF  
newh.membership@newh.org

### personal information:

|  |  |
|--|--|
| last name: <input type="text"/>                    | home address: <input type="text"/> apt: <input type="text"/>                                 |
| first name: <input type="text"/>                   | city: <input type="text"/>   |
| middle initial: <input type="text"/>               | shire: <input type="text"/> postal code: <input type="text"/>                                |
| date of birth: <input type="text"/>                | phone: <input type="text"/>  |
| spouse/<br>significant other: <input type="text"/> | personal email: <input type="text"/>   |
|  | <b>mailing preference:</b> home: <input type="checkbox"/> business: <input type="checkbox"/> |

*\*personal information is not published or shared*

### business information:

|   |  |
|---|--|
| position: <input type="text"/>                                | date of graduation: <input type="text"/>   |
| company: <input type="text"/>                                 | type of business: <input type="text"/>   |
| address/suite: <input type="text"/>                           | <i>i.e., design, sales, hotel management,<br/>manufacturing, procurement, etc.</i> |
| city: <input type="text"/>                                    |  |
| shire: <input type="text"/> postal code: <input type="text"/> |  |
| phone/ext: <input type="text"/>                               |  |
| business e-mail: <input type="text"/>                         |  |
| web address: <input type="text"/>                             |  |

**please list two (2) industry references who have known or worked with you for at least one (1) year.**

|                            |                               |                             |
|----------------------------|-------------------------------|-----------------------------|
| name: <input type="text"/> | company: <input type="text"/> | phone: <input type="text"/> |
| <input type="text"/>       | <input type="text"/>          | <input type="text"/>        |
| <input type="text"/>       | <input type="text"/>          | <input type="text"/>        |

### Statement of Applicant

I apply to become a member of the Network of Executive Women in Hospitality UK Limited (the Company) with immediate effect, upon and subject to the Memorandum of Association and Articles of Association of the Company. I attest to the accuracy of the information in this application and will do all within my power to maintain and enhance the integrity and prestige of the NEWH, Inc. By applying for NEWH membership, I am agreeing to opt-in to NEWH email, and agree to the NEWH Code of Ethics, Photo Release, and Member Logo Policy - see newh.org/member-agreement for details

signature:  date:

Credit Card:  Visa  Mastercard

BACS Payments

Amt: £ \_\_\_\_\_ Exp Date \_\_\_\_\_ CVC Code \_\_\_\_\_

Nat West Bank Account No: 26601087 Sort Code: 56-00-31

BIC: NWBK GB 2L IBAN: GB59 NWBK 5600 3126 6010 87

Billing Street Address \_\_\_\_\_

Cheque Payments - make cheques payable to NEWH UK

Billing City \_\_\_\_\_ Shire \_\_\_\_\_ Postal Code \_\_\_\_\_

Card number \_\_\_\_\_

Send cheque to:  
Kevin Swart  
Arteriors  
Chelsea Harbour Design Centre  
206 Design Centre East, Lots Road  
London SW10 0XF

Print name as shown on card \_\_\_\_\_

Signature \_\_\_\_\_