



IPSA

International Professional Security Association

COMPANY MEMBERSHIP APPLICATION FORM

Registered Company name: _____

Trading name (if different): _____

Company address: _____

Tel. No.: _____ Website: _____

Fax: _____ Email: _____

Is the Company a subsidiary or part of another Company? _____

If "Yes" who: _____

Previous trading names: _____

Please list any other branches of the Company: _____

Has the Company made a previous application for membership? _____ If "Yes" when: _____

Number of Employees: Full Time: _____ Part Time: _____

Commenced trading: _____ Estimated annual turnover: £ _____

Companies House registration number: _____ VAT registration number (incl. EU companies): _____

Company's Insurer, or Insurance Broker: _____

Company's geographical area of operation:

- | | | | |
|---|---|-----------------------------------|---|
| <input type="checkbox"/> East England | <input type="checkbox"/> London (within M25) | <input type="checkbox"/> Midlands | <input type="checkbox"/> North West England |
| <input type="checkbox"/> North East England | <input type="checkbox"/> Northern Ireland | <input type="checkbox"/> Scotland | <input type="checkbox"/> South East England |
| <input type="checkbox"/> South West England | <input type="checkbox"/> Wales | | |
| <input type="checkbox"/> Ireland | <input type="checkbox"/> Europe (other than UK / Ireland) | | |
| <input type="checkbox"/> North and / or South America | <input type="checkbox"/> Africa | <input type="checkbox"/> Asia | <input type="checkbox"/> Australasia |

Please state the Company's primary service offered: _____

Please select all services offered:

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Static Guarding | <input type="checkbox"/> Patrol and Response | <input type="checkbox"/> Keyholding | <input type="checkbox"/> Door Supervision |
| <input type="checkbox"/> Close Protection | <input type="checkbox"/> CViT | <input type="checkbox"/> Vehicle Immobilisation | <input type="checkbox"/> Retail Security |
| <input type="checkbox"/> Facilities Management | <input type="checkbox"/> Maritime Security - Dry Side | <input type="checkbox"/> Maritime Security - Wet Side | <input type="checkbox"/> Consultancy |
| <input type="checkbox"/> Training | <input type="checkbox"/> Systems / Equipment Manufacturer | <input type="checkbox"/> Systems / Equipment Retailer | <input type="checkbox"/> Systems / Equipment Installer / Servicing |
| <input type="checkbox"/> Business Software | <input type="checkbox"/> Waste Destruction | <input type="checkbox"/> Locksmiths | <input type="checkbox"/> In-House Security Team |
| <input type="checkbox"/> Penetration Testing | <input type="checkbox"/> Recruitment | <input type="checkbox"/> Screening | <input type="checkbox"/> Insurance |

Office use only:

Date received _____

Membership number _____

DIRECTORS / PARTNERS / PROPRIETORS

All DIRECTORS / PARTNERS / PROPRIETORS of the company directly involved in the security business must complete a **PERSONAL INFORMATION** form (PI.1/1) and provide individual **CVs** which must be submitted together with this application.

COMPANY NOMINATED PERSON

In accordance with the IPSA Constitution, the person hereafter named on this application form, will have full voting rights.

Full Name: _____

Job Title: _____

E-mail Address: _____

All staff of your organisation are required to abide by the Association's Constitution, Rules and Ethical Code Of Conduct as a condition of Company Membership. These documents can be downloaded from the IPSA website.

The Director, Partner, or, Proprietor named above is now required to sign the following declaration:-

Application Statement: -

I, _____ being the person referred to in this application, by my signature below, hereby certify:-

That to the best of my knowledge, the information I have provided on this application form, is complete and correct and understand that misrepresentation of any of the facts I have now given, or my failure to disclose a relevant matter, will be deemed grounds for terminating this application for company membership. I understand that in the event of my application being unsuccessful, the joining fee is not refundable.

I authorise the IPSA, to approach any government agency, or clients including the referees nominated on this form, to verify the information I have provided. I further hereby give my consent for the IPSA to conduct credit reference checks as they deem necessary, during the period of my membership.

I agree that when the Company is accepted as a member, we will be bound by the Associations Constitution and Rules and accept the IPSA Ethical Code of Conduct and Code of Conduct as part of those rules.

I agree to Company Member details being listed by the Association in IPSA publications and on the IPSA website.

I understand that the personal data I have provided will now be processed and then retained in the manner prescribed. Further I understand that the Company may only use the IPSA logo for commercial purposes, whilst it is the holder of a current "Certificate of Membership".

I have enclosed payment of the initial Joining fee & Annual Subscription.

I further undertake to pay all future Annual Fees as determined by the International Council and I understand that if I choose to relinquish membership part way through a membership year, fees are not refundable. I understand that where an IPSA Inspection is required, I will be invoiced for the Inspection. Details of Inspection Fees are listed on the IPSA website www.ipsa.org.uk or can be obtained from the Association office.

Signed _____ Date _____

FAILURE TO PROVIDE ANY OF THE INFORMATION REQUESTED ON THIS APPLICATION FORM MAY LEAD TO NON-ACCEPTANCE OF YOUR APPLICATION FOR MEMBERSHIP IN ACCORDANCE WITH THE PROVISIONS OF THE ASSOCIATION'S CONSTITUTION AND RULES.

THE INTERNATIONAL COUNCIL HAS THE RIGHT TO REFUSE OR DEFER ANY APPLICATION WITHOUT ASSIGNING ANY REASON. THE ASSOCIATION FURTHER RESERVES THE RIGHT TO IMMEDIATELY TERMINATE MEMBERSHIP SHOULD IT LATER BE FOUND THAT ANY INFORMATION GIVEN IN THIS APPLICATION FORM WAS MADE KNOWING IT TO BE INCORRECT OR TO BE A FALSE STATEMENT.

QUALITY STANDARDS

UK companies are required to provide evidence that they comply with the recommendations of the relevant British Standards for their sector, e.g. BS 7499 & BS 7858 for guarding activities, and the IPSA ethical codes of conduct, as well as any insurance, training or other association requirement. Evidence of compliance with British Standards is by annual inspection either by the IPSA Inspectorate or a UKAS accredited inspection body.

We are inspected by the following UKAS accredited inspection body:

- SSAIB CCAS BSI
 NSI ISOQAR
 Other UKAS accredited inspection body – Please specify: _____
 We are currently selecting an inspection body

or

- We require an inspection by the IPSA Inspectorate
 We are applying from a sector with no applicable British Standards (e.g. training company)

We are inspected to the following standards:

- Security Industry Authority's Approved Contractor Scheme (ACS)
 ISO 9001
 BS 7499 BS 7858 BS 7872 BS 7958
 BS 7960 BS 7984-1 BS 8406 BS 8507-1 / BS 8507-2
 BS 8517-1 BS 8517-2 BS 8549 BS 102000
 BS EN 15713 BS EN 16082 BS EN 16747 BS EN 15713
 Other: _____ Other: _____ Other: _____ Other: _____

In the event of the Company not being fully compliant with the standards set, as long as they meet certain basic criteria, they will be given the status of Probationary Company. The status will then be reviewed following each annual inspection.

Please note Probationary Companies must state the word "Probationary" next to the IPSA logo if displayed or with any mention of their IPSA membership on all company documents, vehicles etc.

Companies outside of the UK are required to provide evidence that they comply with the relevant industry standards for the countries where they operate, and the IPSA ethical codes of conduct, as well as any insurance, training or other association requirement.

We are inspected by:

- Please specify inspection body: _____
 We are currently selecting an inspection body

We are inspected to the following standards:

- ISO 9001
 EN 15713 EN 16082 EN 16747 EN 15713
 Other: _____ Other: _____ Other: _____ Other: _____
 Other: _____ Other: _____ Other: _____ Other: _____
 We are applying from a sector with no applicable industry standards

ITEMS TO BE RETURNED WITH APPLICATION

1. Details of at least FOUR Client Companies to whom IPSA can apply for references Enclosed
2. C V 's for each Director, Partner or Proprietor directly involved in the security business Enclosed

SUBSCRIPTION FEES

Please check our website: www.ipsa.org.uk or contact the IPSA office for current membership and inspection rates.

Please enclose payment for the Joining Fee and Annual Subscription with your application form.

Payments can be made to the Association by the following methods:

- Cheque (made payable to IPSA)
- Credit / debit card
- BACS payment
- A sterling draft - drawn on a bank in the United Kingdom
- International Money Order (drawn in sterling)

We regret that currencies other than pounds sterling can not be accepted due to bank charges involved.

Please note:

- Joining fees are payable on application and are not refundable.
- Inspection is not included in subscription fees and where an IPSA inspection is required, this will be invoiced separately. Inspection Fee costs are detailed on the IPSA website or available from the IPSA office.

Card payments (MasterCard / Visa / Switch / Maestro / Solo):

I authorise IPSA to debit my credit/debit card the following amount: £ _____

Card Number: _____ Start Date: _____ Expiry Date: _____
Name on Card: _____ Issue No.: _____ CVV (Security) No. _____

Signed: _____

To assist our marketing, can you tell us where you heard about IPSA: _____

PLEASE RETURN THE COMPANY MEMBERSHIP APPLICATION FORM AND ALL REQUESTED ITEMS TO:-

International Professional Security Association, 88 Kingsway, London, WC2B 6AA

***We recommend the use of recorded delivery or courier.
Receipt of applications will be acknowledged within two weeks.***