

Membership Application

Applicant should fill-in (or email as scanned attachment) to ATP and include copies of supporting documents and certificates where applicable.

Title _____

Your full name _____

Your name as it will appear on your certificate

Date of birth: _____ National Insurance Number: _____

Email addresses:

Postal address:

Telephone nr[s]: _____

Qualifications and membership of professional organisations, including licence number:

Name and address of practice [include letterhead]

Website details

How many years' experience: _____

Additional partners or directors wishing to be included with this application should give their name, address and date of birth. There is an additional fee of £12 per month per applicant.

Name _____ DOB _____

Address of additional partner/director _____

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Name _____ DOB _____

Address of additional partner/director _____

*Are you registered for Money Laundering Yes / No Have you professional indemnity in place Yes / No

Your renewal date

*REQUIRED BY LAW

Who is your Money laundering supervisor? _____

Money laundering certificate reference if applicable _____

Current Professional Indemnity Insurance Provider [PII] and policy nr.

ATP is in the process of offering members PII as part of their monthly subscription - an upper limit will be applied.

PII renewal date _____

Have you a fee protection scheme in place? _____

You can choose our partners and join at significantly reduced rates and gain many advantages.

Please indicate if you would like a quote?

Where did you find us? _____

Please give a brief description of your duties over the last 10 years including dates. Use a separate sheet if necessary –

Signature _____

I confirm that the information I have given is true and accurate to the best of my knowledge.

PLEASE PROVIDE ALL SUPPORTING DOCUMENTS - such as copy certificates where applicable, an original letterhead with your Firm's name on it. Please send the correct fee* in support of this application. Upon acceptance members may pay joining fee and one year's subscription in full: £560.00 plus £135 for each additional director/partner or by standing order £48.00 plus £12 [each additional director/partner] per month for a period of 12 months.

If not accepted, your fee will be returned in full.

You can submit copies of your credentials or post them to Association of Taxation Practitioners, Friars House, Manor House Drive, Coventry, CV1 2TE

* One-off joining fee of £75.00 per applicant