



Association of Independent Showmen
Registered Company Number 9005587 – limited by guarantee.
Membership Application Form

Name of Applicant _____

Address _____

Postcode _____

*Tel No: _____ * Mobile No _____

(*Telephone number's maybe used to contact you about potential work in your location – see page 2)

Email address _____

Trading Name if appropriate _____

Please tick the appropriate box.

Applicants must provide evidence of their direct involvement within the Fairground or Circus industries. Persons that sell/promote merchandise or commercial services need not apply. Applicants who only operate mobile catering units must show that their primary catering business is directly within the Fairground or Circus industry, not including Events and Festivals.

<p style="text-align: center;"><u>Fairground</u></p> <p>eg. Owners & operators of rides, joints/stalls, side shows. Required: Copies of equipment test certificates, public liability insurance.</p>	
<p style="text-align: center;"><u>Circus</u></p> <p>eg. Proprietors, performers, technical staff. Required: Public liability and appropriate equipment test certificates. Contact the Secretary for full details.</p>	
<p style="text-align: center;"><u>Outdoor Events</u></p> <p>eg. Providing an attraction for the amusement of the public where the member entertains or causes entertainment outside a normal fairground or circus setting. Contact the Secretary before applying.</p>	
<p style="text-align: center;"><u>Associate Member</u></p> <p>eg. Providing goods or services to the Fairground or Circus industries. Appropriate insurance and test certificates are required depending on the business. Contact the Secretary for details.</p>	

Declaration:

I will only authorise the use items of equipment which carry the appropriate and authentic in-date documentation issued by an appropriate body as required by law and by the industry, and/or full Public Liability insurance appropriate for the event or activity. My staff will be fully trained and competent in the safe operation of equipment used and have the appropriate Insurance cover. If I operate outside of this declaration knowingly I give up my right to AIS representation and will be subject of a report forwarded to AIS committee for review of my membership. I will abide by the rules of the AIS and will maintain a good working knowledge of the HSE code of safe practices at all times. I also acknowledge that should the AIS be wound up during my time as a member or within one year of ceasing to be a member, I am liable to contribute no more than £1 (one pound) to the assets of the AIS.

I agree to the Declaration _____ Date _____

Please list attractions, equipment and/or acts owned, in service and available for work relevant to this application.

A growing number of event organizers are contacting the AIS for help in finding attractions. We can put them in touch with members who have equipment act that organizers are looking for, but only if we know what equipment is available for work. Please highlight acts or equipment available for hire.

If more attractions are available please add an additional sheet.

Membership Fee.

1st January til 30th September - £50 Membership fee + £20 admin fee.

1st October til 31st December - £12.50 + £20 admin + the following year's fee of £50.

Membership of the AIS is based on the Calendar year. Therefore all memberships are valid up to 31st December of that year.

The membership fee can be paid by cheque or Postal Order made out to 'AIS', or by cash. Any payment made by cash through the post should be made by Recorded Delivery. Payment can also be made by PAYPAL, BACS or by Bank Card. Contact the Secretary for details.

Please note it is your responsibility to provide any accompanying documents to support your application. If you fail to provide any of these documents within 28 days of the date your application is received by the secretary, then it will not be processed and you will need to reapply.

We endeavour to complete applications within 21days of receiving all supporting documents; if you are unsuccessful we will contact you with our reasons and return any membership fee you have paid.

Newsletters.

I would like my copies of the Newsletter to arrive by email. If 'Yes', please tick the box here.

Where multiple members are at the same address, please tick here to receive only one printed copy of the Newsletter.

If this application is being supported by an existing AIS member, please give the name of that member in the box here:

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This form and supporting documents should be sent to The Secretary:

Postal Address: **21 Bridge Road, Shelfield, Walsall, WS4 1RF.**

email: **ais.sect@yahoo.co.uk**