Application
WEXAS Corporate Membership

Subscriptions: Companies and other Organisations: £170 per annum (£175 for overseas membership). One card is issued in the applicant's name, additional cards are available for named individuals at £30 per card (£35 for overseas members). Company cards cover the cardholder's family. All correspondence, brochures, books, etc. are sent overseas by airmail.

Please complete clearly below for Company Applications which must be signed by an authorised signatory of the company:

Name of Company _____

_____

Company Registration No. _____

Postal Address _____

_____

_____ Postcode _____

Country _____

Telephone _____

Fax _____

Email _____

DETAILS OF APPLICANT(S)

Mr/Mrs/Ms/Dr/Other title _____

First Name _____

Family Name _____

Position in Company _____

Approximate number of overseas trips per annum made by the staff of the applicant's company _____

☐ Please cross here if the applicant named above is currently an individual member of WEXAS

Membership Number if 'yes' ☐☐☐☐☐☐

Name of Company employees (other than the applicant) for whom Membership Cards are required:

1 _____

2 _____

3 _____

4 _____

METHODS OF PAYMENT – THERE ARE 3 OPTIONS:

1. Cheque: ☐ I enclose cheque for:.....(see above for amount due) in payment of Corporate Membership, payable to Wexas Limited.

2. Credit Card: ☐ I/We would like to pay by Credit/Charge Card. If so, please complete this section:

Cross one ☐ MasterCard ☐ Visa ☐ American Express ☐ Diners Club

Expiry Date Month Year ☐☐☐☐ Amount of Payment £ pence ☐☐☐☐ Card No. ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

To avoid any future lapse in my Corporate Membership Subscription and to ensure full continuity of membership benefits, I additionally authorise WEXAS to charge the then current applicable subscription to the Card shown on the anniversary of the first payment and thereafter on each subsequent anniversary until such time as I instruct you in writing to cancel this Membership. This mandate cancels any prior mandate I may have signed in favour of WEXAS either by Credit/Charge card or by Direct Debit.

Applicant's signature _____ Today's date _____

The above-named signatory is deemed to have accepted the WEXAS Conditions of Booking (see WEXAS Travel Planner and other brochures), and this signature is deemed to apply to all those covered by the applicant's Membership Card.

3. Direct Debit:

INSTRUCTIONS (UK BANKS ONLY)

If you decide to pay your subscription by Direct Debit, please complete this section:
WEXAS is a Direct Debit Originator authorised by the Committee of London Clearing Banks. Only after one year may WEXAS change your subscription - and only to the published level applicable at that date.

DIRECT Debit

INSTRUCTIONS TO THE BANK TO PAY DIRECT DEBITS AND YOUR SIGNATURE

- I instruct you to pay Direct Debits from my/our account at the request of WEXAS Limited.
- The subscription of £ _____ is payable immediately, and thereafter on each anniversary of the first payment (the then current applicable subscription, amounts payable under this Direct Debit instruction being variable).
- Subscriptions appear in advance in September's Vista.

The Direct Debit Guarantee

- This Guarantee is offered by all Banks and Building Societies that take part in the Direct Debit Scheme. The efficiency and security of the Scheme is monitored and protected by your own Bank or Building Society.
- If the amounts change, WEXAS will notify you 10 working days in advance of your account being debited or as otherwise agreed.
- If any error is make by WEXAS or your Bank or Building Society, you are guaranteed a full and immediate refund from your branch of the amount paid.
- You can cancel a Direct Debit at any time by writing to your Bank or Building Society. Please also send a copy of your letter to us, quoting your Membership Number.

Banks may refuse to accept instructions to pay Direct Debits from some types of account.

ORIGINATOR'S IDENTIFICATION No. 9 1 1 0 7 7

The Manager _____ Bank PLC

(FULL ADDRESS OF YOUR BANK BRANCH) _____

_____

Name of account to be debited _____

Bank Sort Code ☐☐☐☐☐☐ Bank Account No. ☐☐☐☐☐☐☐☐

Signature(s) _____ Today's date _____