

ADIPS REGISTRATION RENEWAL FORM YEAR 2009

Contact Name:	
Company:	
Address:	
Post Code	
Telephone:	
Fax No:	
Email Address:	

		Please tick included disciplines
Part 1: Initial Test	(Static Ride)	
Part 2: Thorough Test	(Static Ride)	
Part 3: Initial Test	(Mini-Car Ride)	
Part 4: Thorough Test	(Mini-Car Ride)	
Part 5: Initial Test	(Simulators)	
Part 6: Thorough Test	(Simulators)	

I would like a copy of:	Please tick	On CD (free)	Booklet	
'Inspection Procedures'.				£5
'Updated Safety Guide'.				£10
The new 'Advice for Operators'.				£5

Registration Fees (tick requisite box)	BACTA Member	Non-BACTA Member
TOTAL (inc 15% VAT	£48.30	£96.60
Grand Total Membership and Booklets		£

METHOD OF PAYMENT

I enclose a cheque (payable to BACTA) for £.....

PLEASE NOTE THIS FORM SHOULD BE COMPLETED AND RETURNED BY POST WITH A CHEQUE FOR THE REMITTANCE TO: MAUREEN YOUNG AT
BACTA, ALDERS HOUSE, 133 ALDERSGATE STREET, LONDON, EC1A 4JA