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AMEC SMALL CONSULTANCY MEMBERSHIP APPLICATION FORM

The base annual subscription fee for consultancy membership is £300 GBP for one small consultancy with a maximum of two employees to be included for member benefits\*\*. (plus VAT if applicable)

(\*Members may have access to different regional discussions based on their location)  
(\*\*Example of regions (but not limited to) Africa & Middle East, Asia Pacific, European, Latin America, North America)

AMEC has expanded its membership to include a new **small consultancy** category - for small consultancy organizations with a commitment to, an active interest in, or in the promotion of best practice and application of data, analytics, planning, research measurement and evaluation of communication and public relations.

*This category is reserved for 1-2 member teams only. 3+ employees would be Agency or Associate category.*

**SECTION 1 – Membership Manifesto**

|  |  |
| --- | --- |
| Please state reason(s) for applying for Membership of AMEC |  |
| How did you hear about AMEC? |  |
| Have you attended an AMEC event: |  |
| SECTION 2 – General Company Information |  |
| Primary place of registration  VAT number (if applicable)Primary geographical \*Type of company/organisation:  (\*PLC/Limited/Partnership/Sole Trader/Limited by guarantee/other)  Main business service offering  Total number of people employed.  Total number of communication professionals |  |

**SECTION 3 - Organisation Contact Details**

These details will be used for billing and your public membership directory listing

|  |  |
| --- | --- |
| Member Company name: |  |
| Trading Company name - if different |  |
| HQ Address: |  |
| Town: |  |
| Country: |  |
| Postcode / Zip  Telephone: |  |
| Invoicing e-mail / accounts contact:  Member information: |  |
| E-mail address for public directory |  |
| Contact name: |  |
| Website address: |  |
| Social handles: |  |
| Trading/As if different |  |

**\*Primary and Secondary Contacts:**

|  |  |
| --- | --- |
| \*Name of primary contact: |  |
| Job title  E-mail  Direct telephone:  Address (if different to above):  Country based (for Chapter region) |  |
| \*Name of Secondary contact: |  |
| Job title  E-mail  Direct telephone:  Address (if different to above): |  |

Next steps: Once AMEC receives your completed application, the joining invoice will be raised and is payable, your membership will be ratified, and you will be welcomed into the AMEC community.

|  |  |
| --- | --- |
| **Signed:** | …………………………………………….. |
| **Full Name:** |  |
| **Date:** |  |
|  |  |

**Please return applications via email to the AMEC CEO, Johna Burke:** [**johna@amecorg.com**](mailto:johna@amecorg.com) **ensuring you CC AMEC Membership Manager** [**juliewilkinson@amecorg.com**](mailto:juliewilkinson@amecorg.com) **thank you.**