

## APPLICATION FOR MEMBERSHIP

FIRM/COMPANY APPLYING FOR MEMBERSHIP	
REGISTERED ADDRESS	
	POSTCODE
	TOSTCODE
CONTACT NAME	
POSITION	
TELEPHONE	MOBILE
EMAIL	FAX
We confirm that the above named firm/company is involved in or associated with Jersey's funds industry. Please provide evidence of the firm's/company's qualifications for membership (such as the prospectus or latest audit accounts of a fund with which it is involved in a professional capacity).	
SIGNATURE OF APPLICANT	
DATE	

Please return application for membership to Liga Cirite at enquiries@jerseyfunds.org