

## RHA Coach Membership Application Form: Year 1

## **Business Contact Details**

Company name	•••••	
Company reg no		Company type (e.g Limited)
Primary Contact		Job title
Email		
Telephone		. Mobile
Correspondence	address	
		Postcode
		Postcode
Secondary Conta		Job Title
Email		Mobile
Number of emplo	yees	
Number of coach	nes	
Turnover		Date business commenced
Current licenses	(type held) 🔲 National [	☐ International ☐ Restricted ☐ None
Operators license	e number	Date licence granted or last reviewed
Has your compar	ny ever been subject to a Company Vo	oluntary Arrangement (CVA)?
Fleet insurance r	enewal date	(tick to request a contact 3 months before renewal to discuss)
Social media deta	ails:	
LinkedIn		Facebook
Twitter		Instagram
Youtube		Website

Membership Subscription Rates: Year 1 (all prices exclude VAT)							
1 vehicle			£150.00 / £12.50 per month				
2-5 vehicles	•••••		£35	0.00 / £29.17 per month			
6-10 vehicles	•••••		£55	0.00 / £45.83 per month			
11+ vehicles			£80	0.00 / £66.67 per month			
Your Business Ad	ctivities (Please	tick all relevant activities)					
Scheduled Coach	n Services	Contract Touring		Rail Replacement			
Private Hire		☐ International operation	IS	Local Bus Services			
Own Account Tou	ıring	☐ Home to School Travel		Other			
Payment							
Annual subscription		t					
·			Office use only	y:			
VAT @ 20%	•••••	£	Membership N	lumber			
, ,			Process date				
(Optional subscription	for 11 printed issues	s per year)	Sales agent				
Charitable donation	••••	£10.00	Region				
(RHA Benevolent Fund	)		Payment Meth	od			
Total payment		£	Renewal mont	h			
Payment Method	1						
Bank: Yorkshire Bank. So Use the identifier code a IBAN: GB53YORK0807444	and international bank acco 42066766. BIC: YORKGB21744 <b>ard:</b> please call Membersh	Number: 42066766. Account Name: ROA unt number below if you're renewing from	m a non-UK non-ster	ling bank account: one.			
Cheque: please mak on the back of the cheq	e your cheque payable to th ue	e Road Haulage Association Ltd and writ	e your postcode or m	nembership number			

Send your completed form to: Membership Department, Road Haulage Association Ltd, Roadway House, Bretton Way, Bretton, Peterborough PE3 8DD. **Telephone**: 01733 263434 **Email**: membership@rha.uk.net

Form of Declaration							
Reasons for joining the RHA .		•••••	••••	• • • • • • • • • • • • • • • • • • • •	•••••		••••
The RHA and/or our trusted third party busines factual, transactional information and/or of a scontact you about products or services or info	servicing purpose. From time t	o time the	e RHA ar				
Please indicate your pref	erences below:						
☐ I am happy to receive inform	nation from the RHA	OR		<ul><li>information</li><li>Newsletter</li><li>Marketing of</li></ul>	from the RHA and Policy information additional service	tion	
I am happy to receive inforn RHA's trusted Third Party Bus		OR		from the RH Partners: Backhouse Jones Direct insurance Fleetcor Ltd Crouch Recovery	A's Trustee The state of the st	ve information nird Party Busine	) } \$ \$
I am happy for you to contact m	ne by:						
☐ E-mail ☐ Telephone	☐ Post My p	oreferr	ed op	tion would be	e		••••
Please note if you change your mind at a later re-subscribe at any time. For more information policy) or you can request a copy by contacting	n please see our Privacy Policy						cy-
Our Privacy Policy can be viewed at rhaonline.c	o.uk and rha.uk.net. If you are	unable to	access	the policy then p	lease email: gdprer	nquiries@rha.uk.net	
By signing below, you are making an offer to pul Articles of Association, Rules and Code of Condu						ditions set out in the RI	1A's
Name of authorised signatory		• • • • • • •		Position	•••••		•
Signature	•••••	• • • • • •	· • • • •	Date	••••		

If you wish to take out Backhouse Jones Backstop then you should complete the separate Backhouse Jones registration form.