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**PTS Membership Application Form**

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| For PTS Office use only  **Membership Number:** |

**Please complete this form electronically or, for handwritten forms, please use BLOCK CAPITALS. Please return completed form to: Lucie Warren, Executive PTS Secretary, PO BOX 290, Lingfield, Surrey RH7 9AX UK or email to** [**lucie@thepts.net**](mailto:lucie@thepts.net)

If your application is successful, the details you provide will be reproduced exactly as written into the PTS Directory.

**Applicant Name**

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**Business Name (if different)**

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Note: Companies, firms or partnerships applying for membership must send a letter signed by two Directors, Company Secretary, or authorised persons (showing status) appointing a representative to act on behalf of the firm in all matters concerning The Society. This application must be signed by the representative.

**Full Business Address (including Country)**

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**Telephone (including International Dialling Code)**

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**Mobile Phone Number (including International Dialling Code)**

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**Email Address**

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**Company Website Address**

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**Company Registration Number (if applicable) and Country of Registration**

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**VAT Number (if applicable) and Country of Registration**

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**Date Trading Began**

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**Type of dealer (e.g. Wholesale, Retail, Manufacturer, Auctioneer, Postal Administration, Specialist)**

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Note: If your Membership is approved, you will be invited to provide (non-compulsory) extra details of your trading for our database.

**Full Time or Part Time? If Part Time, please provide details of your primary occupation**

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**Please provide details of any other philatelic association memberships**

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**Please provide details and account name(s) of online sales platforms other than your own website**

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**If your business uses social media, please provide details including your account name(s)/ handle(s)**

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**Have you ever been declared bankrupt? Please provide details.**

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**Names and contact details of TWO Trade References (PTS or IFSDA Members Preferred)**

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Note: Applicants for full membership must give the names of at least two members of The PTS or a Trade Society affiliated to the Federation of Stamps Dealers Associations. Applicants for provisional membership may give other references.

**Please provide any other information you feel would support your application.**

Examples include:

* Additional references from established auction houses, your suppliers and your customers
* Links to online reviews from customers, suppliers and partners
* Links to online forums or pages/social platforms where you have contributed, demonstrating your philatelic experience, professionalism and promotion of the hobby
* Copies of any publications (print or online) relating to your business, interest in philately or area of specialism
* Any other evidence of where you are already demonstrating that you and your business comply with the PTS’s code of conduct

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Other Notes:

1. Payment of your subscription is on an annual basis commencing 1st January each year. This payment must be made in Sterling cash or Sterling cheque drawn on a UK bank or by Paypal, VISA, Mastercard or AMEX. Do not send any payment with this application. Once approved, you will be invoiced for the outstanding part (if any) of the application year.

2. Approval of your application may take up to four months. In addition of being approved in a PTS Council Meeting, it is also published for Members' consideration in the Newsletter.

**I wish to apply for Membership of The Philatelic Traders' Society. I understand that, in accordance with the Articles of Association of The PTS Ltd., The Council may in their discretion refuse this application, without giving reason(s). I understand that my membership may be subject to a 12 month probation period. By signing this application form, I give permission for the PTS to make checks against the information I have provided. I confirm that I am already complying with the PTS’s** [**Code of Conduct**](https://www.thepts.net/pts-code-of-conduct.html) **and will continue to do so should my application be approved.**

**Signature**

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**Name of Signature (please use BLOCK CAPITALS)**

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**Date of Signature**

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