



For SWCA office use only:

Application received, date: ____/____/____

Approved by EC: Y / N date: ____/____/____

Print this form, fill out as instructed and send by post to the address in the footer

MEMBERSHIP APPLICATION FORM

SECTION 1: Enter applicant details

Registered name company / organisation:

Head office address:

Street

City

Postcode

Country

Contact person

Name

Function:

Tel:

Mob:

E-mail:

Web:

SECTION 2: Choose membership category.

(Please tick what is appropriate)

ACCREDITED MEMBER (please note: upon audit and approval period you will be classified a candidate member)

Tick here under all activities which relate to your business:

Bottler, specify address of source and bottling plant:

Distributor Bottled Water Coolers, specify brand and type of water (Spring, mineral or drinking water):

Are bottled water labels in accordance with all current legislation for the category of water? (please send samples):

If you have more (distribution) depots, please enter addresses and activities of all locations in Slovakia:

1.

2.

Distributor Point Of Use Coolers,

if you have more (distribution) depots, please enter addresses and activities of all locations in Slovakia:

1.

2.

SUPPLIER MEMBER

Tick here under the main categories of products and services you supply

<input type="checkbox"/>	Bottled Water Coolers	<input type="checkbox"/>	Filter Coolers
<input type="checkbox"/>	Bottles	<input type="checkbox"/>	Caps
<input type="checkbox"/>	Bottling equipment	<input type="checkbox"/>	Filters
<input type="checkbox"/>	Other:	<input type="checkbox"/>	Cups
		<input type="checkbox"/>	Parts
		<input type="checkbox"/>	Truck bodies
			Bottleracks & storage

ASSOCIATED MEMBER

Tick here under the main categories of products and services you supply

<input type="checkbox"/>	Auditing / Inspecting	<input type="checkbox"/>	Laboratory	<input type="checkbox"/>	Software	<input type="checkbox"/>	Consultancy/ Media
<input type="checkbox"/>	Other:						

SECTION 3: Direct membership fee declaration

Declaration needed for membership fee purposes (for Accredited Membership application only)

INFORMATION WILL BE HELD IN THE STRICTEST CONFIDENCE!

Please indicate what applies to your business for the past calendar year-end including all related products and services.

Turnover Bottled Water Cooler industry:	<input type="checkbox"/>	< 500.000 €
	<input type="checkbox"/>	500.001 - 1.500.000 €
	<input type="checkbox"/>	> 1.500.000 €

Turnover Filtered Water Cooler (POU) industry:	<input type="checkbox"/>	< 500.000 €
	<input type="checkbox"/>	500.001 - 1.500.000 €
	<input type="checkbox"/>	> 1.500.000 €

No. of Bottled Water Coolers served (including rental, free-rent, sold or customer owned units)	<input type="checkbox"/>	< 500
	<input type="checkbox"/>	501 - 1.500
	<input type="checkbox"/>	> 1.500

No. of Filteres Water Coolers (POU) served (including rental, free-rent, sold or customer owned units)	<input type="checkbox"/>	< 500
	<input type="checkbox"/>	501 - 1.500
	<input type="checkbox"/>	> 1.500

SECTION 4: Confirm, sign and send

The undersigned hereby confirms on behalf of the Applicant that at all times its business within the Slovak Water Cooler industry will be conducted in accordance with the applicable bylaws and codes of the Slovak Water Cooler Association and that the information indicated above is a true reflection of the records of the business.

Position:	<input type="text"/>	Date:	<input type="text"/>
Name:	<input type="text"/>	Signature:	<input type="text"/>

Please send this form filled out complete, correct and signed to: Gajova 4, 81109 Bratislava, Slovakia

Upon receipt we will register your application and confirm to you accordingly. If your application is accepted you will receive an invoice regarding membership fee. Please note that your application will only be completed once payment of the fee has been transferred to the SWCA account.