

## APPLICATION FORM Retailers

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### APPLICANT DETAILS Please use CAPITAL letters

Title:	Business name:
Forename:	Trading name:
Surname:	Address:
Position:	
Mobile:	County: Postcode:
Direct email:	Telephone:
	Company email:
	Website:

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### BUSINESS DETAILS

#### Company Structure (tick one)

☐ Sole trader    ☐ Partnership    ☐ Limited company    Company number:

Please provide Certificate of Incorporation

#### Retail Sector(s)

Please tick as many descriptions as appropriate to categorise your business:

☐ DIY store    ☐ Farm shop    ☐ Florist    ☐ Garden centre    ☐ Online shop    ☐ Retail nursery    ☐ Supermarket

Please indicate the types of products you sell:

☐ Aquatics/pets    ☐ Birdcare    ☐ Café/restaurant    ☐ Clothing    ☐ Cut flowers    ☐ Furniture/outdoor  
☐ Gardening products    ☐ Giftware    ☐ Plants    ☐ Seed & bulbs

Others (please list):

Total number of retail outlets:

We will require details of these retail outlets once your membership is approved.

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### NATIONAL GARDEN GIFT VOUCHER SCHEME

As a retail member of the HTA you will qualify to participate in the National Garden Gift Voucher scheme. Further details about the scheme and how to become a participant will be provided once HTA membership has been approved.

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## FURTHER BUSINESS INFORMATION

Total annual turnover (please provide proof\*):

Number of staff: Full-time

Part-time:

How long has the applicant owned/operated the business:

New business start up: ☐ Yes

☐ No

I/We have recently purchased this business from an HTA member, who traded as:

Do you have a secondary business sector within this business: ☐ Yes ☐ No

If yes, which sector is applicable: ☐ Retailer ☐ Grower ☐ Landscaper ☐ Manufacturer/supplier

When your membership is approved you will have the opportunity to input the details of your secondary business.

### Associations/Memberships

Please indicate what other accreditations and memberships you currently have:

☐ British Chamber of Commerce (BCC) ☐ British Independent Retail Association (Bira) ☐ British Retail Consortium (BRC)

☐ Federation of Small Businesses (FSB) ☐ Garden Centre Association (GCA)

Others (please list):

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## SUPPORTING INFORMATION

Please give your reasons for wishing to join, together with any other information you feel would be helpful in processing your application; for example if you are reapplying for membership after a period of absence.

As a membership organisation our Articles of Association require your application to be proposed and seconded. Please give the name(s) of any HTA member that you know personally who would be willing to recommend you for HTA membership. If you are new to the industry/your area, or do not know of any HTA members, please tick this box and we will assist you. ☐

#### Proposer

Name:

Company:

HTA membership number:

Telephone:

#### Seconded

Name:

Company:

HTA membership number:

Telephone:

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## CONFIRMATION &amp; DATA MANAGEMENT

I wish to apply for HTA membership. I agree to conform to, and be bound by these Articles and any Rules or other regulations of the Association if adopted. I attach evidence of turnover\*, e.g. a copy of our latest set of accounts or a validating letter from our accountant, a copy of our Certificate of Incorporation (for Limited companies) and a completed Direct Debit instruction (DDI).

Signature:

Date:

The HTA uses the details you have provided in this form for a number of purposes, including compliance with contract and legislation and in accordance with HTA's legitimate business interests. It processes and administers your application and will use these details to communicate to you about your ongoing membership and to provide you with the weekly Member Update which is provided as part of your membership. Consent will be sought for all communications that cannot be justified on any of these grounds. Full details of the personal information that is held and how we process it and your data subject rights can be found in the HTA's Privacy Policy which can be accessed at [www.hta.org.uk](http://www.hta.org.uk).