



APPLICATION FOR ASSOCIATE
MEMBERSHIP OF
FORCE
(FREIGHT ORGANISATION OF RELATED
CARGO EXPERTS)

1. Registered legal Company name (and trading name if applicable):

2. Head Office Address:

3. Key FORCE contact:

Position within company:

4. Telephone number:

Fax number:

After hours phone number:

(Please show full international dialling codes on all numbers)

E-mail address of main contact:

Website address:

5a. Year Company was established:

5b. Paid up share capital:

6. Company branch offices in (town/city)

An office only

office with
warehouse

7. Describe the geographical area covered by Head Office and Branches:

8. What is the status of the Company within the laws of your country (e.g. private limited company, Societe anonyme, partnership etc.)?

9. Is the Company financially linked with any other? YES NO
If yes please give details:

10. What is the financial construction of the Company, Share (stock) holders etc.: (Note: Please supply a copy of your latest balance sheet and profit/loss account with this application. Applications can ONLY be considered if accompanied by this information).

11. Please list the individuals, entities or other ownership structure of your company:

Name _____	% owned _____
Name _____	% owned _____
Name _____	% owned _____
Name _____	% owned _____
Name _____	% owned _____
Total = 100%	

12. Is the Company IATA approved? YES NO
If NO, do you intend to be ? YES NO

Is the Company ISO 9002 approved? YES NO

Is the Company a member of FIATA? YES NO
If NO, do you intend to be ? YES NO

Does the Company have freight liability insurance (e.g. not the same as marine cover) ? YES NO
If YES, please state amount of cover: _____
Name of Insurers: _____

13. Is the Company a member of an industry trade association (e.g. a freight forwarders federation or similar)? YES NO

If YES please give details: _____

14. Is the Company – or has it ever been – a member of an organisation/network similar to FORCE? YES NO

If YES please give details: _____

We are no longer a member

We will resign if admitted to FORCE

We will remain within this organisation

15. The number of persons employed by the Company, including branches is:

Sales _____
 AIR Operational office staff _____
 ROAD Operational office staff _____
 SEA Operational office staff _____
 Administrative office staff _____
 Drivers and freight handlers _____
Total _____

16. The Company has the following existing services:

From/to	By			Full Partner	In conjunction with	
	Sea	Air	Road		Sales Partner	Breakbulk Partner
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

17. Are there any cities/countries where you will NOT give preference to the local FORCE member? YES NO

If YES please give details:

18. In which markets are you most interested in developing new partnerships?

19. Does the Company offer any other industry-related services (e.g. export packing)? If Yes, please give details:

20. Please explain why the Company wishes to join FORCE?

21. Banking information:

Bank name: _____
Address: _____

Telephone: _____
Fax: _____
Account name: _____
Account number: _____

22. Overseas Freight forwarders' References: (you must submit three)

1. Company name: _____
Contact: _____
Address: _____
E-mail: _____
Phone: _____

2. Company name: _____
Contact: _____
Address: _____
E-mail: _____
Phone: _____

3. Company name: _____
Contact: _____
Address: _____
E-mail: _____
Phone: _____

23. Company contact information:

For sales related matters please give:

Contact name: _____
Telephone number: _____
Fax number: _____
E-mail address: _____

For operations related matters please give:

Contact name: _____
Telephone number: _____
Fax number: _____
E-mail address: _____

For accounts related matters please give:

Contact name: _____
Telephone number: _____
Fax number: _____
E-mail address: _____

24. Remittances overseas: *(please detail any banking problems in remitting funds overseas and please indicate standard banking timescale for remittances)*

Statement

To the best of my knowledge the information given to the FORCE Secretariat is full and accurate. Furthermore we have read and understood the FORCE Byelaws and Codes of Conduct and – if accepted as a member of FORCE – we agree that our company, as FORCE applicants, will be bound by the aforementioned FORCE Byelaws and Codes of Conduct. Paying particular attention to the agreement on prompt payment between members in accordance with payment terms.

We also acknowledge that membership of a network such as FORCE demands long-term commitment by us as applicant. Companies who are intending to join the network for a short time period – and expect immediate results – are not encouraged. And whilst results may happen immediately, we recognise that FORCE membership should be looked upon as a long-term investment. We understand that most current FORCE members view that it can take up to five years to establish good two way traffic with all members.

We agree that, once our company is accepted as a member of FORCE, we will send a delegate to each annual Congress for the next 3 years and thereafter will adhere to the Congress attendance conditions in the FORCE Byelaws and Codes of Conduct.

Signed: _____ **Date:** _____

Name: _____ **Position:** _____

Company stamp: