

MEMBERSHIP APPLICATION FORM

To: The Membership Secretary, SAAVA c/o Seed & Co, Cothill, Duns, Berwickshire, TD10 6YW

I apply for Membership of the Association, in accordance with the Constitution and Rules. I attach a CV and a note of my experience and areas of interest in agricultural arbitration and valuation work.
Full Name
(Capitals please)
Address
Occupation
Tel No Fax No
Email
If elected to Membership, I undertake to observe and uphold the Constitution and Rules of the Association and to settle my subscription and any other dues promptly, on demand.
Signature Date
We, the undersigning members, recommend the above applicant for Membership. Within our knowledge he has the requisite interest, experience and qualifications.
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(Membership of these organisations is not necessary, but may qualify the Applicant for a reduced subscription rate, as an affiliated member).

^{*} This need only be stated in general terms, and may omit reference to specific cases and identification of clients, in order to preserve professional confidentiality. The provision of any such information is optional, but may be helpful to the Council in considering your application.