

Fighting Fund Membership Application Form.



Name of Company: _____

Contact Name: _____

Contact Phone Number: _____

Business Address: _____

Postcode: _____

E-mail: _____

Yes I'd like to join the Accountax Fighting Fund (rate £75 + VAT)

I understand I will receive:

- ✓ **4 Member Newsletters**
- ✓ **Discount on seminars**

Please complete the payment details below

- Cheque enclosed for £90.00 (incl. VAT) made payable to Accountax Consulting**
- Please charge £90.00 (incl. VAT) to my credit card**

Please tick: Visa Mastercard Delta Switch Issue No.

Card No:

Expiry Date: Security No:

Signature: Name: Date:

** Please supply business address number and postcode for the card details provided above.

Accountax
One Mitchell Court
Castle Mound Way
Rugby CV23 0UY
Tel: +44 (0)3450 660 035
www.accountaxconsulting.com

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