## MEMBERSHIP ADDITIONS FORM



The **communications contact** completes this form to add subsidiary companies or individuals to a membership. Complete only **one** *'Financial Service Provider details'* section for each company or individual.

- \* Required fields
- \*\* Join the mailing list to receive webinar invitations, newsletters, and other general communications

Membership details (entity that holds or will hold the FSCL membership)				
Member name *				
FSP number *	FSCL member number			
Financial Service Provider details (subsidiary company or individual)				
FSP name *	Phone/mobile *			
FSP number *	Email *			
Trading name	Add this FSP to FSCL's mailing list? **		Yes	No
Financial Service Provider details (subsidiary company or individual)				
FSP name *	Phone/mobile *			
FSP number *	Email *			
Trading name	Add this FSP to FSCL's r	mailing list? **	Yes	No
Financial Service Provider details (subsidiary company or individual)				
FSP name *	Phone/mobile *			
FSP number *	Email *			
Trading name	Add this FSP to FSCL's r	mailing list? **	Yes	No
Financial Service Provider details (subsidiary company or individual)				
FSP name *	Phone/mobile *			
FSP number *	Email *			
Trading name	Add this FSP to FSCL's mailing list? **		Yes	No
Financial Service Provider details (subsidiary company or individual)				
FSP name *	Phone/mobile *			
FSP number *	Email *			
Trading name	Add this FSP to FSCL's r	mailing list? **	Yes	No
Confirmation				
I confirm that:	Date *			
> I have read and agree to be bound by FSCL's rules set out	Full name *			
<ul> <li>in FSCL's Terms of Participation and Terms of Reference.</li> <li>I understand and agree that the entity that holds the FSCL membership is responsible for the financial service providers added to the membership.</li> </ul>	Signature *			