

**CO-OPERATIVES WEST MIDLANDS**

**APPLICATION FOR MEMBERSHIP – Individual / Organisation**  
**(please delete as appropriate)**

**Name**

**Title**

**Organisation**

**Address**

**Tel:**

**Email:**

**I/We apply for membership of Co-operatives West Midlands and hereby agree to uphold the Constitution of Co-operatives West Midlands**

**Signed**

**Date**

**Please return to:**  
**The Secretary, Co-operatives West Midlands**  
**c/o Member Relations Centre**  
**BMI, 9 Margaret Street**  
**Birmingham B3 3BS**

Adopted 5 February 2009