



BRITISH LOCKSMITHS INSTITUTE APPLICATION FOR MEMBERSHIP

Please complete this form in BLOCK CAPITALS, entering details in each box.
Do not leave blanks but enter "N/A" or "None" if appropriate.

Please enclose £47 NON-REFUNDABLE Registration Fee and your Disclosure Scotland
obtainable from <http://www.disclosurescotland.co.uk> (Tel: 0870 609 6006)

and return to: 5d Great Central Way, Woodford Halse, Daventry, NN11 3PZ

Temporary No:

License No:

boxes
for office
use only

Title (e.g. Mr.)	<input type="text"/>	<input type="checkbox"/>				
Forename(s)	<input type="text"/>	<input type="checkbox"/>				
Surname	<input type="text"/>	<input type="checkbox"/>				
Home Address	<input type="text"/>	<input type="checkbox"/>				
	<input type="text"/>	<input type="checkbox"/>				
County	<input type="text"/>	<input type="checkbox"/>				
Postcode	<input type="text"/>	<input type="checkbox"/>				
Country	<input type="text"/>	<input type="checkbox"/>				
Telephone No.	<input type="text"/>	<input type="checkbox"/>				
Facsimile No.	<input type="text"/>	<input type="checkbox"/>				
Date of Birth	<input type="text"/>	<input type="checkbox"/>				
Place of Birth	<input type="text"/>	<input type="checkbox"/>				
Current Job Description	<input type="text"/>	<input type="checkbox"/>				
Present Employer	<input type="text"/>	<input type="checkbox"/>				
If employer is a MLA member please give their Registration Number	<input type="text"/>	<input type="checkbox"/>				
Work Address	<input type="text"/>	<input type="checkbox"/>				
	<input type="text"/>	<input type="checkbox"/>				
Include Postcode	<input type="text"/>	<input type="checkbox"/>				
Telephone No.	<input type="text"/>	<input type="checkbox"/>				
Facsimile No.	<input type="text"/>	<input type="checkbox"/>				
Date joined Company	<input type="text"/>	<input type="checkbox"/>				
If unemployed please state date employment ceased	<input type="text"/>	<input type="checkbox"/>				
If self-employed, please give the following information						
Business Name	<input type="text"/>	<input type="checkbox"/>				
Business Address	<input type="text"/>	<input type="checkbox"/>				
If different from home	<input type="text"/>	<input type="checkbox"/>				
Address for correspondence	<table border="1"> <tr> <td>Tick</td> <td>Home address</td> <td>OR</td> <td>Work address</td> </tr> </table>	Tick	Home address	OR	Work address	<input type="checkbox"/>
Tick	Home address	OR	Work address			
How long have you been a trainee/practising Locksmith?	<input type="text"/>	Years	<input type="checkbox"/>			
Have you ever applied for Membership before?	<input type="text"/>	Yes/No	<input type="checkbox"/>			
If YES, please give dates	<input type="text"/>		<input type="checkbox"/>			
Have you ever been refused membership?	<input type="text"/>	Yes/No	<input type="checkbox"/>			
If Yes, please give details	<input type="text"/>		<input type="checkbox"/>			

The British Locksmiths Institute requires that the character of each of its members is beyond reproach.

You will need to provide us with your CRC check available from Disclosure Scotland

In addition, it is essential that ALL applicants answer the following questions otherwise applications will not be accepted. Have you: -

a) ever been convicted of any offence involving fraud, other dishonesty or violence?

YES

NO

b) ever been convicted of any other offence, excluding minor traffic offences?

YES

NO

c) been adjudged bankrupt or, in Scotland had your estate sequestered, within the last ten years?

YES

NO

d) had any County Court judgement connected with Trading Practices recorded against you within the last three years?

YES

NO

If you have answered YES to any of the above questions, please give full details (using a separate sheet if necessary)

Offence

Court

Date

Result

Comments

DECLARATION

I certify that I have read this form, answered the questions truthfully and understand that these answers are part of my application for membership.

I understand that failure to disclose any conviction which subsequently comes to the notice of the Board of Directors of the Master Locksmiths Association will immediately invalidate membership.

In the event of the answers I have given changing at any time I will immediately notify MLA Head Office.

I will abide by the Bylaws of the Master Locksmiths Association and will assist the Association in achieving its objectives.

I understand that membership of the BLI is a personal membership and cannot be used in any form of advertising.

I undertake not to use any logos, Coat of Arms or title other than those designated by the Bylaws.

I will return membership certificates and identity cards and cease using any reference to BLI if my membership is terminated.

I enclose 2 passport size photographs of me, one endorsed on the reverse by 1 of my referees, confirming that it is a true likeness of me. please tick

NON -REFUNDABLE Registration fee £47.00 (inc. vat) enclosed please tick

Please make cheque payable to MASTER LOCKSMITH ASSOCIATION or MLA

Signed

Date

DATA PROTECTION ACT

Information given on this form will be held on computer as part of the MLA's Membership Database.

Postal details may be given to Regional Officers for circulation of regional meeting details.

GUIDANCE NOTES

Your Disclosure Scotland document will need to have been received by MLA HQ before you membership can be fully endorsed, although you may book on a training course prior to receipt.

This application is for **membership** of the British Locksmiths Institute and is not a qualification.

BLI Qualifications are by examination.

When your application has been successfully processed, payment will be required to pay the Annual Subscription

During their course of work, many locksmiths will come into contact with vulnerable persons, people in vulnerable situations, will attend secure sites and private dwellings. It is, therefore, imperative that the MLA can recommend its members with full confidence

Referees must not be related to the applicant unless he/she is a Member of the British Locksmiths Institute.

One referee **MUST** be a Member of the BLI or a professional person who can supply a personal reference.

You will be advised if further checks are required from any other appropriate sources.

The completion of the form is deemed to be part of the application for membership of the British Locksmiths Institute and must be submitted at the time of application for membership.

Applicants who are granted membership of the Institute are advised that this form will become the property of the Master Locksmiths Association and will form part of the records of the Association. Applicants to whom membership is refused, for whatever reason, may request this form to be returned to them. Please indicate whether you wish for this form to be returned or destroyed if membership is refused.

If you require assistance or advise on completing any part of this form, please do not hesitate to contact MLA Head Office

Return: Destroy: