



P O Box 10800 Market Harborough LE16 0HU
cfa@chilledfood.org www.chilledfood.org

MEMBERSHIP
FORM OF APPLICATION

_____ **LIMITED**

whose Registered Office is at [address]: _____

("the Applicant") hereby applies for Full Membership of the CHILLED FOOD ASSOCIATION LTD ("CFA") and agrees to comply with the constitution of CFA as set out in its Articles of Association, confirms compliance with the Association's standards including those set out in its *"Best Practice Guidelines for the Production of Chilled Food"* and confirms certification against the *BRC Global Standard – Food or International Featured Standard (Food)*.

Dated the _____ day of _____ 202

Signed for and on behalf of _____ **LIMITED**

Director

Company Secretary