

Osmotherley and Area Oil Co-Operative

Ingleby Arncliffe and Ingleby Cross

APPLICATION FOR MEMBERSHIP

Please complete clearly in **CAPITAL LETTERS** and return to Judith Temple, The Old Byre, Ingleby Cross. DL6 3NQ. OilClub.IAIC@gmail.com

Title (Mr, Mrs, Miss, Dr etc.)	
First Name	
Surname	
Address & Post Code	
Home telephone no.	
Daytime/Mobile no.	
Email address or email address of friend who will act as contact	
Location of tank & any access restrictions	
AGA or RAYBURN boilers require an additive. Please indicate if you have one of these types.	

I hereby agree to the following terms of membership:

1. I give my consent for Osmotherley and Area Oil Co-operative to negotiate price on my behalf for the supply of heating oil.
2. I understand that the Osmotherley and Area Oil Co-operative will identify appropriate suppliers of oil and negotiate only the price on behalf of all Osmotherley and Area Oil Co-operative members, and terms will not be negotiated.
3. I understand that Osmotherley and Area Oil Co-operative shall only be responsible for negotiating (at no cost to members) supply price with potential suppliers on my behalf as an Osmotherley and Area Oil Co-operative member.
4. I agree that all payments of invoices must be made by me, as a co-operative member directly to the supplier for each delivery as requested by the supplier. If payments are in dispute for any reason my membership may be suspended until the matter is resolved.
5. I agree that Osmotherley and Area Oil Co-operative will have no liability to me for any claims that may arise between Osmotherley and Area Oil Co-operative supplier and me from any supply contract I may take out with them and the invoicing / payment thereof.
6. I understand that it is my responsibility to ensure that my order has reached Osmotherley and Area Oil Co-operative each time a delivery is scheduled. I will advise any changes to my membership details in writing.
7. I agree that Osmotherley and Area Oil Co-operative will need to pass on my personal details to approved suppliers to enable them to make a delivery.

Signature _____ Name _____ Date _____