

## **Company Registration**

COMPANY DETAILS	
Registered name of Company	
Registered Address:	
Telephone Contacts	Business:
	Fax:
	Out of Hours/Emergency
E-Mail Address	
Directors or Representatives:	
Signature of Director / Representative	
	Date:
PUBLIC LIABILITY INSURANCE	
Name of Company	
Amount of Cover (£10 million minimum)	

<sup>\*\*</sup> You must include a copy of your public liability certificate(s) with this document, confirming the above details \*\*