**MEMBERSHIP**

Registration Form

Company: Sector: Company Address: Number of Employees: First Name: Surname: Position within the Company: Contact Telephone Number: Email Address: Web Address: Where did you hear about us? Date completed:

If you would be interested in taking student placements from New College Lanarkshire please tick the box: [ ]

If you would like to be kept informed of opportunities/updates from New College Lanarkshire that may be beneficial to you and your business please check the following box to opt in: [ ]



Please return this form to:

**Lanarkshire.Businesshub@nclan.ac.uk**