

**THIS DOCUMENT IS TO BE READ IN CONJUNCTION WITH THE CTFA
 (Operating as Cosmetics New Zealand) CODE OF ETHICS**

PLEASE COMPLETE ALL DETAILS

Name of Company _____

Trading Name _____

Company to Invoice (if different to above) _____

Physical Address _____

Telephone _____ Mobile: _____

E-mail _____ Website _____

Company Representative _____

Position in company _____

Technical & Regulatory Representative _____

Contact email _____

Marketing Representative _____

Contact email _____

Support Representative _____

Contact email _____

HR Representative _____

Contact email _____

Main products manufactured/distributed (please tick):

Specify Brands/Houses

- | | |
|--|-------|
| <input type="checkbox"/> Skin Care / Body Care | _____ |
| <input type="checkbox"/> Sun Care /Sunscreen | _____ |
| <input type="checkbox"/> Fragrances | _____ |
| <input type="checkbox"/> Hair Care | _____ |
| <input type="checkbox"/> Toiletries | _____ |
| <input type="checkbox"/> Other (Specify) | _____ |
| <input type="checkbox"/> Contract manufacturer | _____ |

Number of employees _____

Small Business & Exporters' Group

We would like to be included in the Small Business & Exporters' Database

If you are an exporter, do your products undergo substantial transformation in New Zealand and thus qualify for the claim "Made in New Zealand"? Yes No

GMP Certification

We would like to have a GMP audit undertaken Yes

Please note travel costs for the Technical Director are payable. Acknowledge

Our company hereby applies for membership of Cosmetics New Zealand (Cosmetic, Toiletry & Fragrances Association of New Zealand) and agrees to comply with the Association's Constitution and Rules.

I have read the Cosmetics New Zealand / CTFA Code of Ethics and confirm that our company complies with the code.

In signing this document, I confirm that the level stated from within the subscription band document is true and correct to your last full trading year. Please have two witnesses sign your membership revenue bracket as being correct based on your last set of year-end financial accounts. These to be the CEO and CFO equivalent positions in your organisation.

Subscription band: \$ _____

Name and Signature of Director _____

Name and Signature of CFO Equivalent _____

Date: _____

Please complete and return to:

Martha Van Arts | General Manager | Email gm@ctfa.org.nz |

Please note that membership applications can take up to 2 weeks for Board approval and processing.

Gross Sales*	> \$500k	\$500k - \$1m	> \$3 mil	\$3m - \$8m	\$8m - \$15m	\$15m - \$20m	\$20m - \$30m	<\$30m	Assoc. Member
Subscription (exc GST)	\$500	\$800	\$1,100	\$2,000	\$2,750	\$3,200	\$3,750	\$4,750	\$650

Gross sales, including exports, before tax. Excludes domestic, intra-company sales. Membership is based on a full year. Under \$3 million category have the option to pay subscription by instalments.