



AFFILIATE Membership Details

16 rue Alexandre Gavard - 1227 Carouge-Geneva
Email: info@sara-relocation.com
www.sara-relocation.com

AFFILIATE MEMBERSHIP FORM

Affiliate Membership of SARA is open to those organisations that provide products or services that may be of use to either relocation specialist or their clients.

As an Affiliate Member you will:

- Be entitled to being listed on the Association's Website;
- Be given the opportunity to advertise at member's rate in all SARA publication or on the website;
- Be given the opportunity to submit a profile of your organisation in the Association's newsletter;
- Be invited to attend all relevant meetings, seminars and conferences at members rate;
- Be entitled to use the SARA logo on any printed material or in advertisement;
- Be eligible to vote except for by-law changes.

Requirements for admission as an Affiliate Member:

- Have traded for at least two years.
- To complete the attached application form
- To provide the names and addresses of two client referees or to be nominated as an Affiliate Member by a Founding Member or a Full Member of the SARA.
- To provide copies of all printed material, as well as any other information that may assist the Membership Committee when considering your application;
- To adhere to SARA Code of Ethic
- To be available for interview.

Cost:

- Joining fee: CHF 250.-
- Annual fee: CHF 300.-

SARA will review Subscription fees annually
A non profit making organisation



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SECTION 1 GENERAL INFORMATION

Company or Trading Name:

Full Name:

Position:

Address:

Country: Telephone N° /s:

Fax N° : Email:

Website: VAT/TVA number.....

Other relevant information e.g. Is your company a subsidiary of another Company?
.....

EuRA Member: yes/no/application pending ?.....

SECTION 2 TRADING INFORMATION

1. How long has your organisation been offering relocation related services?
.....

2. How long has your organisation been trading?
.....

3. Please state the geographical area in which you offer your services:
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4. Please give a brief description of the service provided:
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.....
.....

5. Please list any other organization o which your firm is a member:
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SECTION 3 REFEREES

NOMINATED BY: , Founding or Full member of SARA.

OR CLIENT REFEREE:

1. Customer name :
Contact name:
E-mail :
Phone and Fax :
2. Customer name :
Contact name:
E-mail :
Phone and Fax :

I/weof
apply for AFFILIATE MEMBERSHIP of the Swiss Association of Relocation Agents and agree to abide by the rules of conduct and objectives of the SARA.

I/we hereby indemnify and hold harmless the Swiss Association of Relocation Agents against any claims arising from my/our activities.

I/we enclose CHF 100.-, non-reimbursable, for the administration fee and will pay CHF 450.-, being CHF 150.- rest joining fee and CHF 300.- Affiliate Membership annual subscription. Payment are not subject to VAT.

Membership will become valid after Affiliate Membership is confirmed and full payment has been received.

Signed:

Date and place:.....



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CODE OF ETHIC

- Every member shall abide by the objectives and rules of the Association
- Members will abide by the Swiss, federal and cantonal legislation
- Members will always work solely in the best interest of the clients by whom they are retained
- Members will not misrepresent themselves, the service which they offer, any subject property, or the Association
- Members will ensure that each client is aware of the terms and conditions upon which the services are being supplied
- Any alleged breach of the rules of conduct will be evaluated by the Executive Committee. The decision will be binding.
- Members will treat with confidence all information supplied by clients
- Members may not accept any commissions, payments or other inducements offered by any third party as a result of transaction undertaken on behalf of a client without the prior knowledge and agreement of that client
- A member shall not seek business or conduct business by improper or illegal means
- All members will indemnify and hold harmless the Association against any claims arising from their activities.
- Members shall not misrepresent their class of membership nor will they claim membership when their membership has ceased.



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CODE OF ETHIC (rest)

- Members will pay their employees according to work legislation and provide adequate professional insurance

We have read and understand these rules and agree to abide by them at all times.

Signed by Date

On behalf of*

* please insert the name of your company