

ABHI MEMBERSHIP DECLARATION 2024



NOTES Corporate Membership

Is applicable to manufacturers, distributors and organisations providing non-medicinal healthcare products and facilities. Subscription fee is based on turnover. *To calculate fee payable, see table on reverse.*

Membership subscription automatically renews on 1 January of each year. ABHI requires six months notice, in writing, before members end their subscription. Clause 4.5 of ABHI Byelaws refers. The notice period commences from the date membership termination notification is received.

Members have a responsibility to advise ABHI as soon as they are aware of any changes to their company structure which may affect turnover at renewal i.e. amalgamation, takeover, divestment or acquisition.

If a member company takes over an existing member company the acquired member will pay full subscription in the year of acquisition and the following calendar year.

Code of Business Practice

Your signature on the reverse of this declaration form acknowledges your undertaking to comply with the [ABHI Code of Business Practice](#). Available to view and download on our website www.abhi.org.uk

A company limited by guarantee Registered in England no 1469941 - Suite 2, 4th Floor, 1 Duchess St, London, W1W 6AN

BASIS OF ASSESSMENT FOR CORPORATE MEMBERSHIP

Subscription dues are based on turnover derived by UK operations.

Turnover is defined as the sale of goods and services from UK operations in the non-medicinal healthcare field to all UK and overseas customers.

Sales by overseas affiliates into the UK market, unless they pass through the UK operation, are also included in the definition of turnover.

No distinction is made between sales income resulting from manufacturing, distribution or services.

Where a member has UK affiliates, subscription dues are payable on the consolidated turnover of UK operations. The term "affiliates" is defined by UK Standards of Standard Accounting Practice and will include the turnover of a UK parent and all its UK subsidiaries.

Membership subject to approval by ABHI Board of Directors

Please complete the details on the reverse and return this form by email to: angela.jeffery@abhi.org.uk

Alternatively, you can mail the completed form to:
Membership Department
ABHI, Suite 2, 4th Floor, 1 Duchess St, London, W1W 6AN

Turnover for the consolidated group is defined above, except that after accumulating the sales to all UK and overseas customers, there will be a deduction to cancel inter-divisional sales between UK members of the group.

Sales to overseas affiliates will continue to be included in the definition of turnover.

The calculated turnover will be matched against the turnover ranges shown on the declaration form overleaf and the subscription level thereby defined.

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Turnover £m	Dues £		Turnover £m	Dues £		Turnover £m	Dues £		Turnover £m	Dues £		Turnover £m	Dues £	
Less than 1	1,785	<input type="checkbox"/>	27.5 - 30	23,200	<input type="checkbox"/>	140 - 150	56,085	<input type="checkbox"/>	370 - 380	75,310	<input type="checkbox"/>	600 - 610	96,285	<input type="checkbox"/>
1 - 2	1,825	<input type="checkbox"/>	30 - 32.5	24,745	<input type="checkbox"/>	150 - 160	56,950	<input type="checkbox"/>	380 - 390	76,490	<input type="checkbox"/>	610 - 620	97,125	<input type="checkbox"/>
2 - 3	2,745	<input type="checkbox"/>	32.5 - 35	26,345	<input type="checkbox"/>	160 - 170	57,785	<input type="checkbox"/>	390 - 400	77,350	<input type="checkbox"/>	620 - 630	97,950	<input type="checkbox"/>
3 - 4	3,650	<input type="checkbox"/>	35 - 37.5	27,705	<input type="checkbox"/>	170 - 180	58,640	<input type="checkbox"/>	400 - 410	78,180	<input type="checkbox"/>	630 - 640	98,780	<input type="checkbox"/>
4 - 5	4,535	<input type="checkbox"/>	37.5 - 40	29,130	<input type="checkbox"/>	180 - 190	59,475	<input type="checkbox"/>	410 - 420	79,025	<input type="checkbox"/>	640 - 650	99,620	<input type="checkbox"/>
5 - 6	5,400	<input type="checkbox"/>	40 - 42.5	30,495	<input type="checkbox"/>	190 - 200	60,325	<input type="checkbox"/>	420 - 430	79,885	<input type="checkbox"/>	650 - 660	100,450	<input type="checkbox"/>
6 - 7	6,260	<input type="checkbox"/>	42.5 - 45	31,800	<input type="checkbox"/>	200 - 210	61,195	<input type="checkbox"/>	430 - 440	80,730	<input type="checkbox"/>	660 - 670	101,285	<input type="checkbox"/>
7 - 8	7,090	<input type="checkbox"/>	45 - 47.5	33,095	<input type="checkbox"/>	210 - 220	62,045	<input type="checkbox"/>	440 - 450	81,595	<input type="checkbox"/>	670 - 680	102,115	<input type="checkbox"/>
8 - 9	7,950	<input type="checkbox"/>	47.5 - 50	34,325	<input type="checkbox"/>	220 - 230	62,895	<input type="checkbox"/>	450 - 460	82,565	<input type="checkbox"/>	680 - 690	102,945	<input type="checkbox"/>
9 - 10	8,755	<input type="checkbox"/>	50 - 55	36,705	<input type="checkbox"/>	230 - 240	63,735	<input type="checkbox"/>	460 - 470	83,300	<input type="checkbox"/>	690 - 700	103,780	<input type="checkbox"/>
10 - 11	9,590	<input type="checkbox"/>	55 - 60	38,920	<input type="checkbox"/>	240 - 250	64,590	<input type="checkbox"/>	470 - 480	84,095	<input type="checkbox"/>			
11 - 12	10,355	<input type="checkbox"/>	60 - 65	40,990	<input type="checkbox"/>	250 - 260	65,445	<input type="checkbox"/>	480 - 490	84,995	<input type="checkbox"/>			
12 - 13	11,180	<input type="checkbox"/>	65 - 70	42,920	<input type="checkbox"/>	260 - 270	66,270	<input type="checkbox"/>	490 - 500	85,840	<input type="checkbox"/>			
13 - 14	11,960	<input type="checkbox"/>	70 - 75	44,715	<input type="checkbox"/>	270 - 280	67,140	<input type="checkbox"/>	500 - 510	86,680	<input type="checkbox"/>			
14 - 15	12,785	<input type="checkbox"/>	75 - 80	46,435	<input type="checkbox"/>	280 - 290	67,995	<input type="checkbox"/>	510 - 520	87,530	<input type="checkbox"/>			
15 - 16	13,480	<input type="checkbox"/>	80 - 85	48,055	<input type="checkbox"/>	290 - 300	68,840	<input type="checkbox"/>	520 - 530	88,380	<input type="checkbox"/>			
16 - 17	14,235	<input type="checkbox"/>	85 - 90	49,555	<input type="checkbox"/>	300 - 310	69,685	<input type="checkbox"/>	530 - 540	89,230	<input type="checkbox"/>			
17 - 18	14,975	<input type="checkbox"/>	90 - 95	50,935	<input type="checkbox"/>	310 - 320	70,540	<input type="checkbox"/>	540 - 550	90,080	<input type="checkbox"/>			
18 - 19	15,710	<input type="checkbox"/>	95 - 100	52,245	<input type="checkbox"/>	320 - 330	71,385	<input type="checkbox"/>	550 - 560	90,915	<input type="checkbox"/>			
19 - 20	16,430	<input type="checkbox"/>	100 - 110	52,680	<input type="checkbox"/>	330 - 340	72,235	<input type="checkbox"/>	560 - 570	91,760	<input type="checkbox"/>			
20 - 22.5	18,230	<input type="checkbox"/>	110 - 120	53,535	<input type="checkbox"/>	340 - 350	73,070	<input type="checkbox"/>	570 - 580	92,610	<input type="checkbox"/>			
22.5 - 25	19,920	<input type="checkbox"/>	120 - 130	54,385	<input type="checkbox"/>	350 - 360	73,930	<input type="checkbox"/>	580 - 590	93,465	<input type="checkbox"/>			
25 - 27.5	21,600	<input type="checkbox"/>	130 - 140	55,245	<input type="checkbox"/>	360 - 370	74,785	<input type="checkbox"/>	590 - 600+	94,310	<input type="checkbox"/>			

Subsidiary and affiliates included in declaration:

DECLARED TURNOVER £M

Company Name : _____

£ _____

Signed: _____

DECLARED DUES - INVOICE AMOUNT

Name: _____

£ _____ **+ VAT**

Position: _____

Date: _____

VAT at current rate is added to declared dues

I certify that the information provided in this document, and any information given in support of this declaration, is correct to the best of my knowledge. As a member of ABHI we undertake to comply with the [ABHI Code of Practice](#)

Purchase Order Number: _____

Name of Code of Business Practice Contact : (Required)

Name: _____

Position: _____