



International Business Centre
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Form SF02
Issue 3

MEMBERSHIP APPLICATION FORM

Please complete this form and return to the address given above.

Give below the name & position of the person to whom correspondence should be addressed:

NAME

POSITION

APPLICATION MADE BY:

NAME

POSITION

COMPANY NAME

BUSINESS ADDRESS

..... POST CODE

TELEPHONE FAX

EMAIL ADDRESS

WEB ADDRESS

NAME OF MANAGING DIRECTOR

DESCRIPTION OF BUSINESS

..... NUMBER OF EMPLOYEES

COUNTRIES EXPORTED TO

.....

I hereby agree to be bound by the constitution of the Chamber if elected.

SIGNATURE DATE