

APPLICATION FOR MEMBERSHIP

The following company applies to become a member of the Trinidad and Tobago Manufacturers' Association:

Date: _____

Company Name: _____

Ordinary Member:

Associate Member:

Address: _____

City: _____ Country: _____

P.O. Box: _____

Telephone: _____ Fax: _____

Factory Address (if applicable): _____

Type of Business: _____

COMPANY SENIOR EXECUTIVE: _____

COMPANY REPRESENTATIVE : _____

(Liaison) _____

No. of employees: _____

Subsidiary _____

of :

Public Company: _____

Private _____

Company: _____

Local Agents: _____

Foreign Agents: _____

PRODUCT(S)/SERVICE(S): _____

BRAND NAME(S): _____

EMAIL ADDRESS: _____

URL ADDRESS: _____

I/we the undersigned do hereby agree to become a member of the Trinidad and Tobago Manufacturers' Association and if accepted agree to be bound by and conform to the Memorandum and Article of the company and any Bye-laws or regulations thereunder.

Dated the _____ Day of _____ 2001

Signature of Proprietor/Principal Officer: _____

OFFICIAL
USE ONLY

TO BE COMPLETED BY A
MEMBER OF THE
MANAGEMENT
COMMITTEE

Proposed by: _____

Seconded by: _____
