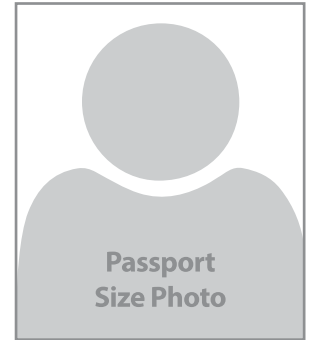




Application for Membership

Date: ___/___/___



The Secretary General,

I/We request you to register my/our Firm/Company as Corporate Member/Associate Member of your Chamber against payment of prescribed fee. I/We accept the objects of the Chamber & fully agree to abide by the rules & procedures of business as laid down in the Memorandum & Articles of Association of the Chamber and not involved in any criminal act. My/Our membership will be subject to the approval by the Executive Committee of the Chamber as per rules. I/We undertake to abide by all decisions of the Executive Committee.

Name of Firm/Company: _____

Name of Accrediated Representative: _____ Designation: _____

Business Address: _____

Postal Address: _____

Residential Address: _____

Mobile No: _____ Fax: _____ CNIC: _____

Telephone No.: _____ Blood Group: _____ Date of Birth: ___/___/___

National Tax No.: _____ GST No. (if applicable): _____
(Please attach photocopy of Certificate) (Please attach photocopy of Certificate)

E-mail _____ Web: _____ Date of Establishment ___/___/___
(Please attach photocopy of Certificate)

Nature of Business: **Manufacturer** **Importer/Exporter** **Distributor** **Dealer** **Services** **Others:**

Main line of Business: _____

Professional License No: _____ Banker's Name & Address: _____
(If applicable please attach photo copy)

Business Status: **Sole Proprietorship** **Registered Firm** **AOP** **Private Limited Company** **Limited Company**

FOR OFFICE USE ONLY

Receipt No. _____ Date: ___/___/___ For Rs. _____

Membership No. _____ Certificate No. _____ Card No. _____

Membership Approved vide Resolution No. _____ Date: ___/___/___

Area _____

Membership Department

Secretary General

President

DECLARATION

I/We do solemnly declare & affirm that particulars provided are true and correct. I/We hold myself/ourselves responsible for legal/judicial consequences arising from the false statement.

Yours Faithfully.

Company Seal		Signature of Applicant	
Proposed by		Seconded by	
Company Name		Company Name	
Membership No.		Membership No.	
Signature		Signature	

Guide Lines/Instructions For Members

Associate	Corporate *	Associate of Person/Registered Firm
NTN Certificate (Individual) including Business Name	NTN Certificate (Company)	NTN Certificate (AOP)
Income Tax Return of Previous Year	Income Tax Return of Previous Year (Company)	Income Tax Return of Previous Year
Copy of CNIC	Copy of CNIC (All Directors)	2 x Passport Size Pictures of Representative
2 x Passport Size Pictures of Individual	2 x Passport Size Pictures of Representative	Partnership Deed
	Form 29 & Memorandum & Articles of Association	1 x Copy of CNIC of All Partners
	Certificate of Incorporation	Form C from Registrar Firms

- In case of an individual/proprietor concern, member cannot nominate a representative on his behalf.
 - In case of Partnership/AOP any of the partners may be nominated to represent.
 - In case of Private Limited & Limited concerns, Chief Executive, Managing Director or any responsible officer of the company may be nominated with the approval of the Board of Directors.
 - The prospective member to provide no criminal conviction certificate (attached herewith).
- * Copy of General Sales Tax registration certificate as a manufacturing concern or Sales Tax registered business concern having annual turnover of Rs. 50 Million or above.

Note: The financial year of the Chamber is from 1st April to 31st March, every year. Rate of subscription and admission fee are as below

Category	Annual Subscription	Registration Fee	Other Charges	Total
Corporate Member	Rs 5000/-	Rs. 3000/-	1400/-	Rs. 9400/-
Associate Member	RS 3500/-	Rs. 1500/-	1400/-	Rs. 6400/-
Corporate Women Entrepreneur	500/-	Nil	1400/-	Rs. 1900/-
Associate Women Entrepreneur	500/-	Nil	1400/-	Rs. 1900/-

Rs.1000/- will be charged for urgent membership certificate. | Incomplete Application Form is liable to be rejected.

Annual Subscription fee for women entrepreneur is waived off at the time of new membership only.



SPECIMEN

UNDERTAKING FOR NO CRIMINAL CONVICTION

I _____ Father / Husband Name _____

CNIC # _____ Resident of _____

Do solemnly affirm and declare as under:

That I am a Proprietor/Managing Partner/Managing Director/ Chief Executive of

M/s. _____

Address: _____

That I am a Pakistani Citizen and not involve in any Criminal malpractice.

That No Criminal Case in any Court of Law is pending against me and I am previously non convict.

The contents of this undertaking are true and correct to the best of my knowledge and belief, nothing has been concealed therefrom.

I/We will abide the United Nations Security Council Resolutions on Counter Proliferation
(mofa.gov.pk/unsc-sanctions/)

Deponent

Join Hands with RCCI

RCCI DASTARKHWAN

Title: **RCCI**
Account #: 0242001002544226
Bank Alfalah Adam Jee Road, Rawalpindi.
Branch Code 0242



Your Donation is a Healthy Investment

RCCI MEDICAL WELFARE COUNCIL

Title: **RCCI MEDICAL WELFARE COUNCIL**
Account #: 0010004322810018
Allied Bank Adam Jee Road, Rawalpindi.



Health is precious - Protect it

RCCI EDUCATION

Title: **RCCI Education Fund**
Account #: 0007001003237097
Bank Alfalah Mall Road Branch, Rawalpindi



When you know better you do better

“One Tree Many Lives”

