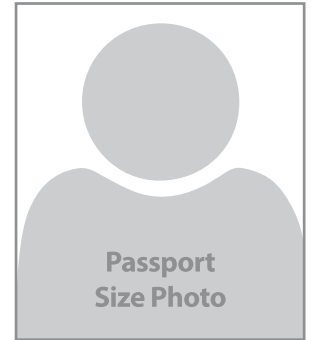




**Application for Membership**

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	
<b>Proposed by</b>		<b>Seconded by</b>	
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



**THE RAWALPINDI CHAMBER OF COMMERCE & INDUSTRY**  
**SPECIMEN SIGNATURE CARD**

Photograph

Membership # \_\_\_\_\_

1. Name of Company/Firm \_\_\_\_\_  
\_\_\_\_\_

2. Authorized Representative Name/Designation: \_\_\_\_\_  
\_\_\_\_\_

3. Signature:-

(i) \_\_\_\_\_ (ii) \_\_\_\_\_ (iii) \_\_\_\_\_

**Declaration:-**

I/We do hereby solemnly declare and attest that the photograph & signature affixed on this card are true of the above named representative of our Firm/Company.

Affix stamp of the  
company / firm

# 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”*

