

Bapo Ba Mogale Business Chamber

Membership Application Form



Please complete all relevant information in the grey blocks indicated and attached copies of applicable documents as per the checklist at the end of the form. The Executive Committee will evaluate the application and applicants will be informed of the outcome of their decision regarding membership.

Business Information

Application date:			
Company name:			
Trade name:			
Local physical address:			
		Post code	
Head office address:			
		Post code	
Postal address:			
		Post code	
Date established:			
Form of business:	<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Closed Corporation	<input type="checkbox"/> Partnership <input type="checkbox"/> Company
Registration no:			
Income tax no:		Vat registration no:	
Details of branches/wholly owned subsidiaries to be included:			

Phone number:						
General email:						
Website:						
Latest annual turnover:						
BEE:		Certified level		% ownership from previously disadvantaged		% women ownership

Business Category

	Accommodation		Home and Garden
	Accounting and Auditing		Human Resources
	Agriculture		I.T
	Animals and Pets		Infrastructure and Construction
	Arts and Culture		Insurance
	Automotive		International Trade
	Aviation		Legal
	Building Services		Manufacturing
	Business and Office Services		Marketing and Advertising
	Business Development		Media
	Cleaning and Maintenance		Mining
	Construction		Pharmaceutical
	Education		Petroleum
	Employee Wellbeing		Property
	Energy		Retail
	Entertainment		Safety and Security
	Finance		Social Services/CSI
	Food and Beverage		Sports
	Functions and Events		Training
	Government Services		Transport and Logistics
	Health and Beauty		Travel and Tourism
	Health and Medical		Waste Management
	Other: <i>(add description below)</i>		

Membership classification

Classification:	<input type="checkbox"/>	Full	<input type="checkbox"/>	Affiliated Association	<input type="checkbox"/>	Corporate Partner
Type:	<input type="checkbox"/>	Gold R250 (turnover under R1,000,000)	<input type="checkbox"/>	Platinum R500 (turnover of R1,000,000 and more)		

Primary Representative

First name:	
Last name:	
Title:	
Position held:	
Cellphone:	
Email:	

Declaration

I, _____ as a

representative of _____ (organisation's name if applicable) hereby confirm that the information contained in this membership application is true and hereby confirm that:

- As a person, is of sound mind and good standing or as an organisation,
- Owns and runs a business within the region or lives in the Bapo Ba Mogale region
- Has an interest in local economic development and with good knowledge and understanding of the economic situation in the region
- Will voluntary contribute to the success of the Council and the region by means of apprenticeships, internships, mentoring and shadowing
- Will comply with Chamber Constitution

Signature:	
Name:	

Date:	
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Document checklist

Please include certified copies of all relevant documents with membership application

- Company/CC registration documents
- Proof of residence or operating business in region
- Identification documents of all members/directors/owners
- Identification document of representative
- BEE certificate
- Tax clearance certificate
- UIF compliance certificate
- Any other industry specific certification