

FORM - B

BANGLADESH FERTILIZER ASSOCIATION
APPLICATION FOR ADMISSION AS MEMBER

*The Chairman
Bangladesh Fertilizer Association
Al-Razi Complex (5th Floor)
166-167, Shaheed Syed Nazrul Islam Sarani
Purana Paltan, Dhaka-1000, Bangladesh.*

Dear Sir,

I/We am/are desirous of becoming member of the Bangladesh Fertilizer Association and agree to pay regularly its annual subscription and also agree to bye-laws framed thereunder. I have already paid prescribed admission fee and annual subscription vide money receipt No. Date of Tk. (Taka) only, copy of which is enclosed.

I/We would request you to kindly accept this application and grant membership of the Association.

1. Name of applicant :
2. Address : (any change in address to be promptly notified to the Association) :
 - a. Present :
 - b. Permanent :
 - c. Business :
 - d. Telephone No. (it any) : Off : Res :

3. Type of Firm :

Proprietorship
Partnership
Company

4. a. Name of Proprietor/CEO/MD :
(Proprietor in case of proprietary firm, Chief Executive Officer/Managing Director in case of Limited Company).

5. Type of Business (Tick) :

Distributor
Dealers/wholesalers
Retailers
Importers
Manufacturers
Suppliers Agent
Exporters

(Evidence in support to be submitted)

6. Membership category wanted (Tick) :

Ordinary
Associate
Group

7. Membership with other Trade Association :

Name of Association	Date of Membership
i.	
ii.	
iii.	

8. Name and address of two persons (of whom at least one should be member of the Bangladesh Fertilizer Association) to be given as reference :

Name and address	Membership No.

9. Any other particular /information that the candidate may like to furnish about himself or his business.

10. Declaration

I/We the undersigned do hereby declare that :

- i. The above statements are correct.
- ii. In the event of my admission as member of the Association, I/We will abide by the Memorandum and Articles of Association of the Bangladesh Fertilizer Association and the regulations/bye laws made thereunder and in force.

iii. I/We will advance the objectives of the Association to the best of my ability and will attend the meetings thereof as often as I conveniently can during the tenure of my membership.

Yours faithfully,

Date :

Signature of the Applicant

(FOR ASSOCIATION USE ONLY)

1. Date of receipt of application :

2. Money receipt No. Dated
(Checked by Accounts Section)

3. Decision of Board :
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Certificate issue date	Membership No.	Membership Category	Region