



FIAM

Fertilizer Industry Association of Malaysia

FIAM MEMBERSHIP APPLICATION FORM

Name of Applicant Company : _____

Address of Applicant Company : _____

Tel & Fax : _____

Email Address : _____

Name of Chief Executive/Senior Executive of Department : _____

Accredited Representative : _____

Activity of Applicant Company :

1. (a) Trading (b) Manufacturing (c) Importer

2. Sales Turnover in metric tons in each year for last 3 financial years.

Year Metric Tons

- a)
- b)
- c)

3. Membership Class Applied

Ordinary Associate Affiliate

Date : _____

Signature of Applicant Company : _____

Proposed by :

Seconded by:

Signature _____

Signature _____

Name of Ordinary Member _____

Name of Ordinary Member _____



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To the Executive Council, FIAM,

We, _____
(Name of Applicant Company ó Block Letters)

of _____

hereby apply to be admitted as an ORDINARY / ASSOCIATE / AFFILIATE member of FIAM.

If admitted to Membership, we hereby agree:

To be bound by the provisions contained in the Constitution of FIAM and
any by-laws for the time being inforce thereunder.

We hereby nominate

(Name)

_____ to act as our
(Title/Position)

accredited representative in accordance with the Rules of the Association.

Signature _____

Name _____

Title _____

FOR OFFICE USE

Date Application Received : _____

Date of Executive Committee Meeting : _____

Application : Approved / Not Approved

Membership Category

<u>Membership Class</u>	<u>Entrance Fee</u>	<u>Annual Subscription</u>
Ordinary <input type="checkbox"/>	RM2,000.00	RM5,000.00
Associate <input type="checkbox"/>	RM2,000.00	RM3,000.00
Affiliate <input type="checkbox"/>	RM2,000.00	RM2,000.00

Date Applicant Notified _____

Date Payment Received _____

Signature of Secretary _____