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Email: info@nigerian-shipping.org Website: www.nigerian-shipping.org

MEMBERSHIP APPLICATION FORM

DETAILS OF INSTITUTION/COMPANY

Institution/Company:		
Address:		
State Registered:		
Tel.:	Mobile:	
Website:	-	
Email:	RC No:	
Primary Sector of Business:		
Number of Employees:		
Bankers:		
Less than \$500,000.00 \$500,000.00 - \$1,000,000.00 \$1,000,000.00 and above		
CEO/MD		
Full Name:		
Job Title:		
Email:		
Mobile:		
LIAISON PERSON Full Name:		
Job Title:		

		C	OATE REGISTERED	REGISTRATION/MEM	BERSHIP NUMBER
NCDMB NJQS					
NIMASA					
DPR					
NPA					
CFFRN					
ISAN					
MASTER MARINE	RS				
CILT					
OTHERS					
Percentage Ow	nership:				
Percentage Ow Name of Vesse	<u> </u>				
	<u> </u>				
Name of Vesse Ship Type: FRACK RECORDS I	Is:	rent or most re	(SUMMARY OF JOBS/COI		•

Email:

Name:							
Position:							
Company:				Contact No.:			
Email: Membership Cate	egory:			Membership No).:		
Capacity in whicl		Applicant is kn	own to	<u>-</u>			
REFERENCES(mu I, the undersigned for membership o the applicant, whi	, recommend the f the Nigerian C ch I can verify.	ne above Comp hamber of Ship	any/App pping. I	olicant, from busi append my initial	ness/personal k s against all sta	tements by	
I have known the	Company/appli	cant for	у	ear(s) and I supp	ort the applicati	on for membership.	
Signature:				Date:			
PAYMENT DETAILS		R	REGISTRATION		АМ	ANNUAL DUES	
Corporate Memb	ership		₩50	0,000.00		₩250,000.00	
Institutional Mem	bership						
Category A			₩1,	000,000.00		₩500,000.00	
Category B			₩2,	000,000.00		₩2,000,000.00	
PAYMENT METHO	ODS (Please tick a	ppropriate box)					
Cheque End	closed. (Cheque s	should be made pa	yable to t	ne Nigerian Chambei	r of Shipping)		
Payment b	y Bank Deposit.	(All bank deposit	s should l	e made in favour of	the Nigerian Chamb	er of Shipping.)	

Account Name: Niger Bank: First Bank - Acc		•	
SUBSCRIPTION TO NCS JOUR	NALS		
Please indicate if you would lik	e to subsc	ribe to our weekly e-newsletter.	
E-Newsletter	Free	Enter Email (if different from conta	nct email):
How did you learn of The Niger	rian Chamb	per of Shipping?	
Recommended by a Mer	nber	Internet	Publications
Attended Past Events		Contacted by Staff	
Others	Please sp	ecify:	
DECLARATION			
Signature:		Date:	
I hereby on behalf of			Confirm that the
		plication form are, to the best of r conditions of membership, main	

Obligations of Members

Every Member shall be bound further to the best of its ability the objects, interest and influence of the Chamber, and shall observe all by-laws of the Chamber made pursuant to the powers hereinafter contained.

It is the responsibility of all Members to:

subscription and uphold the values and principles of the Chamber.

• Safeguard the interest of the Chamber and to observe the provisions of the Constitution of the Chamber as well as to adhere to all resolution passed at General Meeting;

• Cooperate in all activities to ensure the promotion and Chamber;	attainment of the objectives of the
Pay promptly annual subscriptions and all monies due to	to the Chamber.
Payment of Subscriptions	
Members shall undertake to pay such subscriptions as n	nay be determined by the Board.
Subscriptions shall be payable in advance or on due date	es prescribed by the Board.
Revocation	
Members who in spite of reminders, are in arrears of mo or have failed to comply with other obligations defined in be members of the Chamber and shall forfeit all the bend	this Terms and Conditions, shall, cease to
Resignation	
A member may terminate its membership of the chamber writing to the Chamber. If the last day of the notice period member shall be liable to pay all subscription due from its	d falls into another month, the resigning
I hereby accept the above terms and conditions of being a Me	mber of the Nigerian Chamber of Shipping
Name:	
Signature:	Date:

FOR OFFICIAL USE ONLY

Membership Number:	
Date Received:	
Membership Category Applied for:	
Processed by:	

Please return completed form to

The Nigerian Chamber of Shipping

2A, Azare Crescent, Off Liverpool Road, Apapa,

Lagos, Nigeria.