Secretariat: Suite-801, Concord Tower 113 Kazi Nazrul Islam Avenue, Dhaka-1000. Telephone: 880-2-9337437 Fax: 880-2-9349520

E-mail: bdthaichamber@gmail.com

Website: www.btcci.ogr.bd

APPLICATION FORM FOR MEMBERSHIP

To The Board of Directors Bangladesh Thai Chamber of Commerce & Industry Dhaka, Bangladesh. 2 Passport Size Photograph of Applicant

Dear Sir,

I/We hereby agree, if elected, to become a General/Associate member of "Bangladesh-Thai Chamber of Commerce & Industry" and undertake to conform to and be bound by the Memorandum & Articles of Association and the Byelaws of the association in effect from time to time.

Particulars of the Applicant

1.	Name of Company/Organization:	
2.	Address:	
3.	Telephone:	
4.	Mobile: Fax:	
5.	Web Site (If any): E-mail:	
6.	Name of the Chief Executive with Position:	
7.	Name of the person with Position nominated for the Chamber:	
8.	Nationality of the nominated person:	
9.	Nature of business:	
10	. Bankers:	
	(i) Address:	
	(ii) Telephone: Fax:	
11. Please submit 2 photos of the nominated person and Company registration documents (i.e. Trad		
	Joint Stock Registration for Limited Company, TIN Certificate): (i)	
	(ii) (iii) (iii)	
12	. Previous or current business with Thailand/Bangladesh and nature of relationship with name of contact	
	in Thailand:	

- 13. Please tick $(\sqrt{\ })$ any of the following for your membership:
 - For General Membership: Tk 30,000 (Tk 20,000 for registration & Tk 10,000 for current year subscription)
 - For Associate Membership: Tk 25,000 (Tk 20,000 for registration & Tk 5,000 for current year subscription)

Declaration:

Detai anon.			
I the undersigned certify that to the best of my knowledge $\&$ belief, above statement correctly describes my organization.			
	Signature of Applicant with Seal		
	Date of Signature:		
	Name & Designation:		
	Address:		
Proposed by:	Seconded by		
Designation	Designation		
Address	Address		
Signature with Seal	Signature with Seal		
FOR OFFICIAL USE ONLY			
Date of Receiving of Application:			
Date of Confirmation/Rejection of Membership:			
Payment Received Amount: Tk			
Pay Order/Bank Draft/Cheque No:			
Cheque Issue Date:			