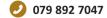


MEMBERSHIP FORM



admin	(

@lembabusinesscouncil.co.za

AV	v
- N	w
~	۷,
	_

www.lembabusinesscouncil.co.za

COMPANY INFORMATION		Date	
Company Name			
Trading As			
Trading A3			
Registration number			
Cell Phone	Work Phone		
E-mail			
Website			
Physical Address			
		Code	
Postal Address (If Different)			
		Code	
CONTACT / DIRECTOR			
First Name			
Last Name			
Last Name			
Clan Name			
Ciail Name			
Cell Phone	Work Phone		
E-mail			



MEMBERSHIP FORM

COMPANY SERVICES		
Nature of Services		
Areas of Service: Town		
Local Municipality		
District Municipality		
Province		
Please Tick if your business renders serv		○ No
Please Tick each Province that you rend LP □ GP □ MP □ NC □		
LE II UEII IVIIII IVOII		FS - FC -
	WC NW KZN	FS 🗆 EC 🗆
Contact Person - Sales	WC NW KZN	FS EC
Contact Person - Sales		FS EC
	E-mail	FS EC
Contact Person - Sales		FS EC
Contact Person - Sales Cell Phone		FS EC
Contact Person - Sales Cell Phone		FS EC
Contact Person - Sales Cell Phone Contact Person - Accounts	E-mail	FS EC
Contact Person - Sales Cell Phone Contact Person - Accounts	E-mail	FS EC
Contact Person - Sales Cell Phone Contact Person - Accounts Cell Phone	E-mail	FS EC
Contact Person - Sales Cell Phone Contact Person - Accounts Cell Phone	E-mail	FS EC

E-mail Application & Proof of Payment to admin@lembabusinesscouncil.co.za (Attach an electronic or printed Company Profile for further profiling on the LBC website)