MEMBERSHIP FORM



(يرجى تعبئة اسم الشركة واسم الشخص المسؤل باللغتين العربية والإنجليزية)

Company Name	Fields of activities	النشاط التجاري
اسم الشركة		
Autress		
P. O. Box		
Phone		
Fax		
E-mail		
Homepage		
Name of Responsible Person		اسم الشخص المسؤل
Position		المنصب
Direct Phone		
Abbreviation of name you wish on Membership Card		
We wish to establish other trade relations with German companies in the following fields:		
We wish to be regular members of Ghorfa with annual membership fees as indicated be	elow:	
Turnover	Membership fees	Please check
Above 25 Mio Euro p.a.	Euro 2.400,-	
From 5 - 25 Mio Euro p.a.	Euro 1.500,-	
Below 5 Mio Euro p.a.	Euro 1.000,-	
We attach herewith further information about our Company and its Products.		
 We agree / do not agree / to storing this information and transferring it to a third pa establishing trade relations or any other purpose of economic nature. (Please delete 	rty for what is not applicable)	
Place & Date Stamp &	[?] Sionature	

P.S.: The Ghorfa-Membership will come into effect after the membership fees are transferred to Ghorfa account as mentioned in the Invoice.