

Membership No. ....  
(for office use)



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இலங்கை தேசிய வர்த்தகச் சங்கம்

# MICRO & SMALL ASSOCIATE-MEMBERSHIP APPLICATION FORM

## 1. Details of the Company

Company Name			
Company Address			
Name of the Head of the Company		Designation	
Contact Person		Designation	
Mobile No.		Tel No.	
WhatsApp number if difference from the above		E-mail	
Fax		Web	

## 2. Legal Status (Please mark v)

Proprietorship ☐ Partnership ☐ Private Limited Company ☐  
Association ☐ Other (Please Specify) ☐

Business Registration No		Commencement of Operation (Year)	
District		Divisional Secretariat	
Number of Employees			

(\*Please attach a copy of your Business Registration Certificate)

## 3. Scale of the Enterprise: (Please mark v)      Micro ☐      Small ☐

\*Please refer the definition below

Economic Sector	Category	No of Employees	Annual Turnover
Industry Sector	Micro	Less than 10	Less than 20 million
	Small	10-50	20-350 million
Services Sector	Micro	Less than 05	Less than 20 million
	Small	05 - 50	LKR 20 – 350 million

## 4. Details of Proprietor/ Partners/ Directors:

Name with initials	National Identity Card No:	Gender

## 5. Nature of your Business (Please mark ✓)

Committee		Committee		Committee	
Agriculture & Food Processing		Automobile & Automotive Components		Banking and Financial Services	
Insurance		Boat Building & Marine Services		Ceramics, Glass & Minerals	
Cosmetics & Personal Care		Diary & Livestock		Education & Training Services	
Engineering & Construction		Export Industries		Foreign Employment	
Gem & Jewellery		Healthcare & Pharma		ICT & Enabling Services	
Imports, Trading, Wholesale, Retail & Distribution		Packaging, Printing & Advertising		Plantations	
Power & Energy		Professional Services		Rubber, Metal & Plastic	
Small & Medium Enterprises		Textile & Apparel		Transport & Logistics	
Tourism Industry					

## 6. A brief description of your business/ products or services.

- I / We agree to be bound by the Chamber's Memorandum and Articles of Association and its by-laws.
- I/We hereby certify that all information furnished by me/us in this application is true and correct.
- I/we submit herewith the
  - Completed Associate Membership Application Form
  - Copy of the Business Registration Certificate and
  - Payment of LKR 5,000.00 (admission fee and annual membership subscription fee)

Date: .....

.....  
The signature:

.....  
Designation:

**Note:**

**Micro and Small Scale Associate Membership fee Structure:**

Admission fee (new joinees):	LKR 2,500.00
Annual Membership Subscription:	LKR <u>2,500.00</u>
<b>Total Payable</b>	<b>LKR <u>5,000.00</u></b>

From the second year onwards the annual subscription fee would be LKR 2,500/-

**Payment Method:**

cheque should be drawn in favour of “**The National Chamber of Commerce of Sri Lanka**” and crossed A/C Payee only.

Please deposit your payment to our below Bank Account and send us the copy of the deposit slip along with the application.

**Name of the Bank & Branch** : Bank of Ceylon, City Office  
**A/C Name** : The National Chamber of Commerce of Sri Lanka  
**A/C No.** : 350940

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**FOR OFFICE USE ONLY**

Application is in order with BRC and Payment				Date Received	Recommendation By the Secretary General/CEO	Recommendation By the Accountant
BR Copy		Payment				

**Membership awarded.**

Date: .....

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Secretary General / CEO

**The National Chamber of Commerce of Sri Lanka**