

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

ශ්‍රී ලංකා ජාතික වාණිජ මණ්ඩලය  
இலங்கை தேசிய வர்த்தகச் சந்தேகம்

# 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 ✓)

Proprietorship	<input type="checkbox"/>	Partnership	<input type="checkbox"/>	Private Limited Company	<input type="checkbox"/>
Association	<input type="checkbox"/>	Other (Please Specify)	<input type="checkbox"/>		<input type="checkbox"/>

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 ✓)

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 v)**

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.

<b>Name of the Bank &amp; Branch</b>	: Bank of Ceylon, City Office
<b>A/C Name</b>	: The National Chamber of Commerce of Sri Lanka
<b>A/C No.</b>	: 350940

---

**FOR OFFICE USE ONLY**

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

**Membership awarded.**

Date: .....

.....

Secretary General / CEO

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