



FAPA
FERRO ALLOY PRODUCERS' ASSOCIATION

Application for Membership

Company Name:

Physical Address:

City: Postal Code:

Postal Address:

City: Postal Code: Province:

Telephone with area code: Fax with area code:

Company Website:

Contact and e-mail address:

Managing Director / CEO:

Association Representative:

Accounts:

Detail type of activity of your company:

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I/We hereby apply for membership of the Association:

In making such application I/We agree, should the application be accepted, to abide by the Constitution and Rules of the Association. I/We further agree to conform with resolutions of the Executive Committee, which administers the Association's affairs, and to pay all subscriptions within three months of receiving an invoice from the Association.

Signature:..... Designation: Date:.....