



ICCJ
ESTB 1921

S.H. INDIAN MERCHANTS ASSOCIATION OF YOKOHAMA
The Indian Chamber of Commerce and Industry Japan Tokyo

CORPORATE MEMBERSHIP APPLICATION FORM

TYPE OF MEMBERSHIP: **Ordinary Membership**

Name of Business/Organisation:

Name of the Representative for ICCJ & Designation:

Japanese Ability: : Fluent Good Minimal None

Registered Address:

Head Office:

Mailing Address (if different form above):

Tel:

Fax:

E-mail:

URL:

No. of Employees:

Country/Year of Incorporation:

Type of Business: Subsidiary Branch Representative Office Joint Venture

GOI undertaking K.K Y.K Others

Authorised Capital: Paid-Up Capital: Gross Sales Revenues as at __/__/____

Main Business: I.T. Trading Banking/Insurance Others (please specify)

Main Business Activities:

(please list)

Section in the Chamber to be allocated for membership *please tick one*:

- IT/Communication Banking/Insurance Engg./Construction Commodities Community Affairs
 Services (Travel/Tourism) Transport Education,Cultural Trade Kansai chapter
 Professionals-CPA,Lawyers etc

Note:

1. Information provided is strictly confidential
2. Please attach a copy of the Company's Tohon & Businesses Profile of your Company
3. Please return the completed form with the details of the bank transfer made .Bank transfer to be made to:
 - a. Bank of India,Tokyo Tozaa account 0143306 with The Bank of Tokyo Mitsubishi UFJ Ltd , Head Office favouring "Indian Merchants Association of Yokohma account number 7093000039
4. **Fees being remitted : Annual Subscription: JPY**

*I/We certify that the information given is correct to the best of my/our knowledge.

*I/We the undersigned also agree that membership dues shall be paid annually, and fees, if any, shall be paid monthly upon receipt of an invoice from the IMAY - ICCJ.

*I/We agree to abide by the Articles and bye-laws of the. IMAY – ICCJ

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Authorised Signatory with Company Hanko and Date

APPROVED

Hon. President

___/___/____