

ASSOCIATE/ CONSULTANCY MEMBERSHIP APPLICATION FORM

NOTE:

- This application form is applicable to Ordinary Membership Category, which is for companies in manufacturing and value add.
- The application should be filled in duplicate, one copy to be retained by the company and the other submitted to KAM.
- When returning the completed application form, please enclose a cheque payable to "KAM Collection Account" in settlement of the entrance fee and annual membership fee.
- Make sure that two KAM members who propose and second your application append their official company stamps alongside their signatures.
- Attach a copy of your Company's CR12, Certificate of Incorporation & KRA Pin Certificate.
- For the Turnover, please quote the audited accounts of the last financial year where possible. The company's turnover confirmation will be reviewed periodically through your authorized Auditors.
- Please note that the information you provide in this form will be treated as confidential.

SECTION I: COMPANY CONTACTS

Company Name:
Postal Address:Postal Code:
Registered Company Location (County)
Registered Company Physical Address (town, street, and building)
Branches Office Location(s):
Telephone No(s).:
WhatsApp No(s)
E-mail Address:
Web Site:

SECTION II: COMPANY DETAILS

- I. Nature of Business:
- 2. Principal Services offered by the Company:

	Services Name	Brand Name
Ι.		
2.		
3.		
4.		
5.		

- 3. Which year was the business established:....
- 4.
 Type of Ownership
 (a) Limited Company, Private/Public.....

 (b) Partnership.....
 (b) Partnership.....
- 5. Full names and Nationality of the company Director/Partner at the date of this application:

Full Names	Nationality	Email	Direct Phone/ Cell

6. Names and contacts of the Managers:

	Name	Email	Direct Phone/ Cell
Chief Executive			
Finance Manager			
Marketing Manager			
Corporate Affairs Manager			
Human Resources Manager			
Administration Manager			
Others			

- 7. Total capital invested:
 - (a) Share capital:.....
 - (b) Loan capital:....
- 8. Approximate annual turnover Kshs.....
- 9. Number of Employees (a) Permanent:...... (b) Casual:.....

10. Structure of Annual Membership Fee

Annual membership fee is based on company's turnover as follows:

Table I:

Annual Turnover (Ksh.)	Annual Subs Fee (VAT Inclusive) (Ksh.)	New Members Entrance Fees (VAT Inclusive) (Ksh.)	Total Payable by New members (Ksh.)		
l	2	3	4		
Below 20 Million	28,135.80	14,737.80	42,873.60		
20-50 Million	42,203.70	22,106.70	64,310.40		
51-100 Million 63,305.55		33,160.05	96,465.60		
101-250 Million	105,509.25	55,266.75	160,776.00		
251-500 Million	167,712.38	87,849.34	255,561.73		
501-1 Billion	218,052.45	114,217.95	332,270.40		
I-3 Billion	323,561.70	169,484.70	493,046.40		
3-5 Billion	352,579.94	184,684.73	537,264.67		
5-10 Billion	422,037.00	221,067.00	643,104.00		
Over 10 Billion	492,376.50	257,911.50	750,288.00		

- The Entrance Fee indicated in column (3) is a one-off payment i.e. at the time of joining the Association.
- Please Tick $[\checkmark]$ the amount you are to pay according to column (4) in Table 1.
 - (a) Ksh. 42,873.60 []
 (b) Ksh. 64,310.40 []
 (c) Ksh. 96,465.60 []
 (d) Ksh. 160,776.00 []
 (e) Ksh. 255,561.73 []
 (f) Ksh. 332,270.40 []
 (g) Ksh. 493,046.40 []
 (h) Ksh. 537,264.67 []
 (i) Ksh. 643,104.00 []
 (j) Ksh. 750,288.00 []

In the second year after joining, members will only be required to pay the annual subscription fee indicated in column (2) of Table I or as may be determined by the Executive Committee as per clause 16 of the Memorandum & Articles of Association.

Com	Dany	y's Auditor	confirmation	of	turnover	(to	be	filled	only	y b	y the	Audi	tors	;)

We confirm that the Company's turnover for the previous year is as indicated above

Signature	Stamp
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SECTION III: EXPECTATIONS

What are your expectations from KAM?

SECTION IV

11.	Proposer: Name of the company:					
	Signature:					
	Date:	(Company stamp)				
12.	<u>Seconder:</u> Name of the company:					
	Signature:					
	Date:	(Company stamp)				

CHECKLIST

Ensure the following is done before submitting the form:

	Item	Please Tick (√)
1.	Sections I & III of the form completed	
2.	Auditor's confirmation of annual turnover	
3.	Form signed and stamped by Proposer and Seconder - both KAM Members	
4.	Appropriate payment for both annual subscription and entrance fees attached	
5.	Please attach the following company documents: a) CR12	
	b) Certificate of incorporation	
	c) KRA PIN certificate (Income Tax – Company, Income Tax – PAYE & VAT)	
6.	Signed members code of conduct	

DECLARATION

I hereby declare that the information given above is complete and correct.¹

Full Name:	
Designation:	
Signature:	.Date:

For and on behalf of our company I am applying for membership in Kenya Association of Manufacturers (KAM) and agree to be bound by its memorandum and articles of association and any rules thereunder, which are now or may at any time be in force; to notify Kenya Association of Manufacturers of any changes in Directors/Partners of our company/firm during the period of our membership.

¹ Please note that information in Section I and section II will be used for KAM Web site and Directory, the rest is only for KAM Confidential Database.