

MEMBERSHIP APPLICATION FORM

Company Information

NAME OF BUSINESS:	
MAILING ADDRESS:	
BUSINESS TELEPHONE/MOBILE NO:	
FAX:	
EMAIL ADDRESS:	
BUSINESS WEBSITE:	
BUSINESS DESCRIPTION:	

Company Representative

NAME OF REPRESENTATIVE/ CONTACT:	
TITLE:	

Nature of Business (tick one)

Services*	<input type="radio"/>	Manufacturing	<input type="radio"/>	Non-Profit	<input type="radio"/>
Wholesale	<input type="radio"/>	Accommodation	<input type="radio"/>	Other**	<input type="radio"/>
Retail*	<input type="radio"/>	Construction	<input type="radio"/>		
Distribution	<input type="radio"/>	Agriculture	<input type="radio"/>		
Indicate Business type (e.g. Financial, IT, e-Commerce, Professional, Catering, Beauty, Clothing, Food etc.) ** Please specify					

Tell us more about your business and expectations.

1. How long have you been in business?

2. How many people are employed by your business?

Full-time Part-time

3. Have you been a Member of DAIC before? Yes No

4. If “Yes”, why did you leave?

5. What reasons made you consider becoming a member again?

6. What type of services/assistance would you like to receive from the DAIC?

7. Identify areas considered to be of high priority for training and development in your organization.

8. What do you see as your biggest business challenge to date?

9. Give your understanding of the purpose of the DAIC?

List three (3) things you would like to see happen as a Member this year.

1) _____

2) _____

3) _____

Can you recommend a potential member to DAIC?

NUMBER OF EMPLOYEES	SUBSCRIPTION RATES (EC\$)	SELECT ONE
Individual	\$300.00	<input type="radio"/>
2 to 4	\$500.00	<input type="radio"/>
5 to 10	\$850.00	<input type="radio"/>
11 to 25	\$2,000.00	<input type="radio"/>
26 to 59	\$2,500.00	<input type="radio"/>
60 to 99	\$3,000.00	<input type="radio"/>
≥100	\$4,000.00	<input type="radio"/>

Signature: _____

Date: _____

Payment can be made via Cash, Cheque, or MoBanking.

Please make cheque payable to: Dominica Association of Industry and Commerce.

Mobanking Details:

Account Name: DAIC

Account Number: 115002476

Account ID: 5551153

For Office Use Only

Date Received: _____

Method of Payment: _____

Received By: _____

Receipt #: _____



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