APPLICATION FOR MEMBERSHIP

Code: **7.15.3**, rev: **2**

Secretary/Director
Limassol Chamber
Of Commerce and Industry
P.O.Box 55699
3781 Limassol, Cyprus
Tel. 25-877350/25-662556
Fax.25-661655
E-mail:
c.anastassiades@limassolchamber.eu
www.limassolchamber.eu

Limassol		
Dear Sir,		
We hereby declare the name of our company together with relevant information, with the request that our Company is registered as a member of the Limassol Chamber of Commerce/Industry/Services/Tourism Section.		
In case our application is approved we undertake the obligation to remit the registration fee of €100 together with the annual membership fee, and comply with the Existing Memorandum and Articles of Association of the Chamber, as well as any future amendments.		
Yours faithfully,		
COMPANY INFORMATION:		
1. Name of Applicant:		
2. Postal Address:		
3. P.O.Box:Postal Code:		
4. Telephone: Fαx:		
5. E-mail:		
6. Home page:		
7. Name of Director/Partner:		
8. Contact Person:		



9. Main activities:

Limassol Chamber of Commerce and Industry

	Industry: (Products)	
	Commerce: (Products)	
	Services: (Type)	
	Tourism: (Type)	
10. Date of Registration:		
	-	
11. Pe	ermanent Offices in Cyprus Yes	
	No 🗆	
12. N	umber of employees	
1-5 🗆 6-10 🗆 11-20 🗆 21-50 🗆 51-100 🗆 100+		
We, undersigned members of the Limassol Chamber of Commerce & Industry, support the present membership application.		
1.		
2.		
	E ATTACH OF CERTIFICATE OF REGISTRATION	