

(MEMBERSHIP FORM -INTENTIONAL ORGANIZATION)

- 1. Name of the Organization.....
- 2. Address of the Register Office.....
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Telephone No.....Fax No.....
E-mail.....
- 3. Nature of Business.....
- 4. Address of Regional head office.....
- 5. Office Location.....
- 6. Date of Registration in Bangladesh.....
Registration No.....
- 10. Head of the organization.....
- 11. Name of the Authorised person with position to represent the company in the Association.....
- 12. Specimen signature of the authorized representative.....

Seal of the
company

Signature of Chairman/Managing Director

Date.....

(This section is for our use only)

15. Membership proposed by:

IPAB member's name.....

Seconded by IPAB member.....