

PORTUGAL-MALTA CHAMBER OF COMMERCE MEMBERSHIP APPLICATION FORM

PRINCIPAL & CORPORATE MEMBERS ONLY

COMPANY NAME:

 ADDRESS:

 ADDRESS:

 POSTCODE:

 MAIN TELEPHONE:

 WEBSITE:

 COMPANY REG. NO.:

 VAT NUMBER:

I am applying to become a member of the Portuguese-Maltese Chamber of Commerce

AUTHORISED REPRESENTATIVE:

 POSITION:

 SIGNATURE:

 ID CARD. NO.:

 CONTACT TELEPHONE:

 EMAIL:

INDIVIDUAL / STUDENT MEMBERS ONLY

NAME:

 COMPANY: (IF APPLICABLE)

 ADDRESS:

 ADDRESS:

 POSTCODE:

 CONTACT TELEPHONE:

 EMAIL:

I am applying to become a member of the Portuguese-Maltese Chamber of Commerce

SIGNATURE: ID CARD NO.

SECTOR (PLEASE TICK ANY THAT APPLY)

- ACCOUNTING AND AUDITING
- ADVERTISING AND CREATIVITY
- AGRICULTURE
- ARCHITECTURAL SERVICES
- BANKING
- BUSINESS SERVICES
- CHEMICAL & PHARMACEUTICAL
- CONFERENCE ORGANISATION
- CONSTRUCTION
- E-COMMERCE
- ENERGY
- ENGINEERING
- FINANCIAL SERVICES
- FOOD
- GAMING
- LANGUAGE SCHOOLS
- HOTELS, RESTAURANTS & CATERING
- ICT
- IMPORT AND EXPORT
- LAW
- MANUFACTURING
- PROPERTY AND REAL ESTATE
- TOURISM AND TRAVEL
- TRANSLATION & INTERPRETATION
- TRANSPORT AND LOGISTICS
- OTHER (PLEASE STATE BELOW)