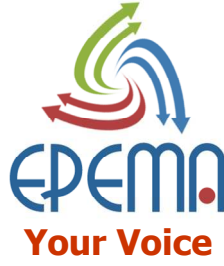


Membership Application Form

Company Name			
Company Representative		Job title	
Representative cell phone			
Company activities			
Management address			
Phone 1 number		Fax 1 number	
Phone 2 number		Fax 2 number	
Factory address			
Phone 1 number		Fax 1 number	
Phone 2 number		Fax 2 number	
Company E-Mail			
Company website			
Membership type	<input type="checkbox"/> Active Member <input type="checkbox"/> Associate Member		
Subscription date	Day	Month	Year
What is the reason (s) for subscription in our association?			
Participation in Exhibitions			
EPEMA Plastic Training Center			
Plastic Technical Supporting			
Other (please mention it)			
How did you heard about us and our activities?			
Search Engine			
International \ Local Exhibition			
EPEMA Website			
EPEMA Newsletter			
Journal \ Magazine			
Other (please mention it)			

Egyptian Plastic Exporters
and Manufacturers Association



الجمعية المصرية
لمصدرتي و مصنعي البلاستيك

Representative Signature	_____
	<You signature here>

	<Date>

