

MEMBERSHIP APPLICATION FORM



Once you fill the form, please return by email to ifamembership@fertilizer.org

TO THE BOARD

We (name of applicant organization)

Of (address of organization and country)

Telephone _____ Cell phone _____

Email _____ Website _____

Vat Registration Number _____

Other Tax Identification Number (if VAT is not applicable) _____

hereby apply to be admitted as an **ASSOCIATE MEMBER** of the International Fertilizer Association (IFA).

If admitted to membership, we hereby agree to be bound by the provisions contained in the Articles of Association/ Bye-Laws and to comply with IFA's Code of Conduct and Safety, Health & Environment Principles.

Name of Company Leadership _____

Title / Position _____ Email _____

Beneficial Ownership Disclosure

Name(s) of Beneficial Owner(s) _____

Sanctions Disclosure

We hereby certify that the company is

- not under any international sanctions
- under sanctions in the following jurisdictions : _____

We hereby nominate Mr/Ms (full name) _____

Title / Position _____ Email _____

(address to which letters and documents from the Association should be sent)

to act as IFA's **main contact** in accordance with the provisions of the Articles of Association and the Bye-Laws of the Association.

Date _____

Signed
(Name and Title)

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1. Name of applicant organization

2. Address of applicant organization

3. Name(s) of parent organization(s) *(please indicate % share)*

4. Name(s) of subsidiary organization(s) *(please indicate % share)*

5. What was your sales turnover in each of the past 3 financial years?

20

20

20

6. What was the sales turnover of your group as a whole in each of the past 3 financial years?

20

20

20

7. What proportion of the total value of the figures given in 5. and 6. above is attributable to trade with and/or work for the fertilizer industry?

a) in respect of your company %

b) in respect of the entire group %

8. If you produce fertilizers or raw materials, please give full details of your plant locations, products and rated production capacities (*use separate sheet if necessary*). In case of plants under construction, please describe the project and indicate expected date when production will commence.

9. If you are a service organization, please describe the nature of your activities and, where appropriate, supply a list of your member organizations/principal shareholders.

Signed

Date

(Name and title)

Tel

E-mail
