## **KECAMTWA CORPORATE MEMBERSHIP APPLICATION 2012**

CORPORATE Membership is KES 30,000 per year

Application to be submitted with Non Refundable Processing fee of KES 5,000

All Corporate Member Applicants to Undergo 6 Months Vetting Period

| Company Name                    |  | Agency Please indicate are  | eas of activity:   |
|---------------------------------|--|---|--|
| company Name                    |  |   | <b>/</b> -   |
| Trading Name                    |  | □ Actors  | Children   |
| Contact Name                    |  | □ Background Artistes   | □ Characters   |
| Physical Address                |  | Children  | ☐ Models   |
|                                 |  | Number of Children Rep  | resented   |
| Code                            |  | Number of Adults Represented  |  |
| Postal Address                  |  | Please list 3 production companies or advertising agencies as references: (Include Job Name/Contact)  |  |
| Code                            |  |   |  |
| Telephone                       |  |   |  |
| Fax                             |  |   |  |
| Email                           |  | Declaration:  |  |
| A/hr nr                         |  | I confirm that I have the capacit<br>application on behalf of the Cor<br>'the Company'.   | ty within the Company to make<br>npany (hereinafter referred to as |
| Website                         |  | I confirm that the Company agro   | ees to be bound by the Articles of                                 |
| Coy Reg Nr                      |  | Association for as long as the Co<br>Association.   | ompany remains a member of the                                     |
| Date Founded                    |  | I confirm that the Company is eligible for membership under the existing rules of the Association.  |  |
| Owner/Director: Primary Details |  | I understand that the Company may, at any time, withdraw from<br>membership of KECAMTWA by giving notice of one calendar month<br>in writing. |  |
| Name                            |  | I hereby confirm that all the ab<br>and the Company applies for me  | ove information is true and correct<br>embership of KECAMTWA.      |
| ID Nr                           |  | I understand that KECAMTWA m<br>September annually.   | embership fees are due for payment                                 |
| Position                        |  | Name:   | Signed:  |
| Cell                            |  | Date:   | Position:  |
| Email                           |  | Please return completed form<br>documentation by email to in<br>or drop by hand to 16 <sup>th</sup> Floor <sup>y</sup>                        | fo@talentcastingkenya.com  |

## Please indicate nature of company with X

CC 
Pty Ltd 
Sole Prop 
Partnership

| Copy of ID         | Company Reg Doc             |
|--------------------|-----------------------------|
| □ Proof of Address | □ Tax Clearance Certificate |