APPLICATION FORM FOR MEMBERSHIP
- 2022 -

The Chief Executive Officer
Association of Ghana Industries (AGI)
P. O. Box AN 8624 Accra North
Accra – Ghana
Please tick (√) on the basis of location of your primary establishment

- Ashanti Regional Branch
- Accra Regional Branch
- North East Regional Branch
- Bono East Regional Branch
- Ahafo Region Branch
- Bono Regional Branch
- Savannah Regional Branch
- Western North Regional Branch
- Tema Regional Branch
- Volta Regional Branch
- Eastern Regional Branch
- Upper West Regional Branch

The Chief Executive Officer
Association of Ghana Industries (AGI)
P. O. Box AN 8624 Accra North
Accra – Ghana

Dear Sir/Madam,

**RE: Application for Membership**

We hereby apply for Ordinary Membership of the Association of Ghana Industries. The parts A, B and C of this form are duly completed by us. Originals of Certificate of Incorporation/Registration and Certificate to Commence Business can be assessed by the AGI upon request. The Application Fee is submitted together with this form.

We recognize that membership will become effective upon full payment of the annual subscription fee, which will be processed upon receipt of a Demand Note of the Association.

**Enclosed is one copy each of:**

Certificate of Incorporation/Registration No.: ................................................. Date: .................

Certificate to Commence Business No.: .......................................................... Date: .................

Signed by: Name .................................................... Position .........................................
PLEASE COMPLETE IN BLOCK LETTERS. In case space is insufficient attach an additional sheet.

**Part A 1 - Company Address and Location**

Name of Organisation/Company: ........................................................................................................

Postal Address: .................................................................................................................................... Town:

Company Telephone: .............................................................................................................................. Fax:

Company Website: ....................................................................................................................................

Company Email: ......................................................................................................................................

Location Head Office: ..............................................................................................................................

Location Factory: .....................................................................................................................................

* Field with details not to be published and only for AGI purposes.

**Part A 2 - Chief Executive**

P L E A S E C O M P L E T E I N B L O C K L E T T E R S

Name of CEO: ........................................................................................................................................ Title:

Position: ................................................................................................................................................

Telephone Direct Line*: ............................................................................................................................. Mobile*:

CEO’s Email Address*: .............................................................................................................................

**Part A 3 - Contact Person for AGI, if different from A2**

P L E A S E C O M P L E T E I N B L O C K L E T T E R S.

Name of Contact Person: ........................................................................................................................ Title:

Position: ................................................................................................................................................

Telephone Direct Line: ............................................................................................................................. Mobile:

Email Address: ..........................................................................................................................................
Part B - Statistical Data shall be treated strictly confidential and not made available to third parties.

B1 - Company

(1) Ownership Type:  ☐ Sole Proprietorship  ☐ Partnership  ☐ Public Ltd  ☐ Private Ltd

(2) Ownership Status:  ☐ Private  ☐ State  ☐ Mixed

(3) Please indicate (roughly) the percentage of the company that is owned by:

Ghanaian private: .......... Ghanaian State: ........... Foreign private: ...........

(4) Year the company effectively started operations in Ghana: .................

(5) No of Employees: (current status)

☐ <20  |  ☐ 21 – 50  |  ☐ 51 – 100  |  ☐ 101 – 250  |  ☐ 251 – 500  |  ☐ 501 – 1000  |  ☐ >1000

(6) Turnover (last financial year) FINANCIAL YEAR: ........

☐ Up to GHc 50,000  |  ☐ Over GHc 1 million up to GHc 10 million
☐ Over GHc 50,000 up to GHc 100,000  |  ☐ Over GHc 10 million, up to GHc 100 million
☐ Over GHc 100,000 up to GHc 500,000  |  ☐ Over GHc 100 million
☐ Over GHc 500,000 up to GHc 1 million  |  ☐ Start-up business, no Financial Year completed yet

B2 Export

(1) Company exported over the last two years  ☐ Yes  ☐ No

(2) If yes:  ☐ less than 10 times  ☐ 10 times or more

If (1) is yes, main export markets/destinations are:

☐ West Africa  |  ☐ Asia
☐ Other African Countries  |  ☐ Middle East/Arabic Region
☐ Europe (EU)  |  ☐ North America
☐ Europe (Non - EU)  |  ☐ Others (Specify)...........................................

B3 Trade Fairs

The Company is interested to participate at AGI Trade Fairs ☐ Yes ☐ No ☐ Undecided

If yes, ☐ in Ghana  ☐ in ECOWAS Countries

B 4 Imports

Company imports about ........% of total inputs (raw materials & spare parts - rough estimate)

B5 The Company is already member of:

☐ Ghana Employers Association (GEA) ☐ Ghana National Chamber of Commerce & Industry (GNCCI)
☐ Federation of Ghanaian Exporters (FAGE) ☐ Other (please specify): ..................................................
Part C - Data will be used for AGI Publications (Membership Directory, Buyers Guide, website, etc.) Your company will be listed in alphabetical order with full details of A1, C2 and C3 under the General Listing. Company’s name will also be listed under respective sector(s) in the appropriate Sector Listing. If you require further information, please contact the AGI Secretariat.

C1 - Please select the sector(s) of your company’s main business activity.

If more than one applies, tick up to three major areas. Please do not tick more than three!

Manufacturing of:

☐ Radio, Television, Communication Equipment
☐ Machinery & Equipment
☐ Rubber & Plastic Products
☐ Paper & Paper Products incl. Packaging Materials
☐ Garments, Textile & Apparel
☐ Chemical & Chemical Products
☐ Motor Vehicles, Trailers and other Transport Equipment
☐ Leather Products
☐ Toiletries & Cosmetics
☐ Fabricated Metal Products
☐ Pharmaceuticals
☐ Publishing & Printing
☐ Food & Beverage
☐ Electrical Machinery & Apparatus
☐ Other (please specify) ………………………

Other Industry:

☐ Mining & Quarrying
☐ Oil & Gas Extraction
☐ Electricity, Gas & Water
☐ Construction

Services:

☐ Engineering
☐ Logistics & Transport
☐ Banking, Financial Services Incl. Insurances
☐ Tourism & Hospitality
☐ Telecommunication
☐ Wholesale, Retail, Ex- and Import
☐ Business Services
☐ Other (please specify)
☐ Computer & Software Industries
..............................................

C2 - Our main area of business is: PLEASE, COMPLETE IN PRINTED BLOCK LETTERS.

This entry should describe the purpose and main activity of your business as concise as possible and should give potential clients a good idea about your business.

C3 - Our five (5) main products or services: PLEASE, COMPLETE IN PRINTED BLOCK LETTERS

1. ........................................................................................................
2. ........................................................................................................
3. ........................................................................................................
4. ........................................................................................................
5. ........................................................................................................

To submit your form, click in the checkbox provided below.
☐ I agree that the information I have provided may be used by AGI.