

MEMBERSHIP APPLICATION FORM

The Executive Director,
 The Association of Tanzania Employers,
 P.O. BOX 2971
DAR ES SALAAM

- (1) We desire to be admitted to membership of the Association of Tanzania Employers and we undertake, if accepted, to be bound by its Constitution. This application covers our branches which are located in the following places:.....

- (2) We certify that as at 30th June this year/or at date of application our total work-force consisted of..... Employed persons. **(Please attach your NSSF Form 15 & 16 or PPF remittance form together with your Certificate of Incorporation or Business License)**

- (3) **Name of Organization**
- Nature of Business.....
- Business Address (Location).....
- Postal Address.....
- Telephone Numbers.....
- Fax Number.....
- E-mail Address.....
- Company Website
- Name of Managing Director/CEO**.....
- Email address.....
- Telephone number.....
- Name of main contact person for ATE business**.....
- Email address.....Telephone

- Name of Human Resources Manager**.....
- Email address.....Telephone

Name of Health & Safety Manager.....

Email address.....Telephone

Name of Legal Affairs Manager.....

Email address.....Telephone

Name of Training Manager.....

Email address.....Telephone

Name of HIV/AIDS coordinator.....

Email address.....Telephone

Name of Communications/PR Manager.....

Email address.....Telephone

Other contacts.....

Email address.....

Telephone number.....

Signature:.....Position.....Date.....

Please consult the following subscription rates when making payment:

Number of Employees	Subscription Rate (TSHS)	Entrance Fees
1 - 10	100,000/=	100,000/=
11 - 25	200,000/=	100,000/=
26 - 50	400,000/=	100,000/=
51 - 100	800,000/=	100,000/=
101 - 250	1,000,000/=	100,000/=
251 - 500	1,200,000/=	100,000/=
501 - 750	1,500,000/=	100,000/=
751 - 1000	1,750,000/=	100,000/=
1001 - 1500	2,000,000/=	100,000/=
1501 - 2000	2,250,000/=	100,000/=
2001 - AND ABOVE	3,000,000/=	100,000/=
ASSOCIATIONS	2,000,000/=	100,000/=