



THE PRIVATE SECTOR ORGANISATION OF JAMAICA

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Website: www.psoj.org Email: jodir@psoj.org

ASSOCIATION MEMBERSHIP APPLICATION FORM

Company

Address:

Primary Representative:

Position

Telephone: **Fax:**

E-Mail: **Website:**

Alternate Contact:

Position: **Email:**

Social Media:   **Other:**

Gross Revenue/Annum: \$0-40M \$41-99M \$100-200M
 \$201-400M \$401-999M \$1B & over

No. of Employees/Members:

What sector best describes the industry in which your business operates?

- | | | |
|---|---|---------------------------------|
| <input type="checkbox"/> Banking and Financial Services | <input type="checkbox"/> Telecommunication/Technology | <input type="checkbox"/> Legal |
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Tourism | <input type="checkbox"/> Media |
| <input type="checkbox"/> Agriculture | <input type="checkbox"/> Energy/Environment | <input type="checkbox"/> Retail |
| <input type="checkbox"/> Transportation | <input type="checkbox"/> Real Estate | <input type="checkbox"/> Other |

Briefly describe the nature of your business.....
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Please attach the following documents to the completed application form:

- | | |
|--|---|
| <input type="checkbox"/> Company's Profile | <input type="checkbox"/> Company's certificate of Incorporation |
| <input type="checkbox"/> Company's certificate of Registration | <input type="checkbox"/> Profiles of Directors/ Major shareholders & Executives |

Are you a member of any other association? If so, please state

Signature of Applicant: **Date:**

REFEREE INFORMATION: For the final approval of all membership applications please provide the following information.

Name of referee: **Signature of referee:**
(Your referee must be an existing PSOJ member or the Association's Banker)

Address:

Telephone: **Fax:** **E-Mail:**

Approved by Executive Committee on: