



**THE PRIVATE SECTOR ORGANISATION OF JAMAICA**

39 Hope Road, P.O. 236, Kingston 10, Jamaica: Tel: (875) 927-6238, Fax: 927-5137  
Website: [www.psoj.org](http://www.psoj.org) Email: [marketing@psoj.org](mailto:marketing@psoj.org)

**ASSOCIATION MEMBERSHIP APPLICATION FORM**

**Company** .....

**Address:** .....

**Primary Representative:** .....

**Position**.....

**Telephone:**..... **Cellphone:**.....

**Fax:**.....

**E-Mail:**..... **Website:**.....

**Executive Assistant's Name**.....

**Telephone** ..... **Email:** .....

**Accounts Manager's Name**.....

**Telephone** ..... **Email:** .....

**Marketing Manager's Name**.....

**Telephone** ..... **Email:** .....

**Social Media:**  .....  ..... **Other:**.....

**Gross Revenue/Annum:**  \$0-20M  \$21-50M  \$51-100M  
 \$101-150M  \$151-200M  \$201 - 300M  
 \$301-500M  \$501-1B  >\$1B

**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 & Climate | <input type="checkbox"/> Retail |
| <input type="checkbox"/> Transportation                 | <input type="checkbox"/> Real Estate                  | <input type="checkbox"/> Other  |

**Briefly describe the nature of your business**.....  
.....

**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"/> Company's Tax Compliance Certificate   |
| <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:** .....

Updated February 2019