



MEMBERSHIP APPLICATION FORM

Entity Name: _____

Address: _____

Telephone No: _____ Fax No: _____

Web Site: _____ Email: _____

Active Membership

Telecommunication operating companies

- < 50,000 lines/10,000 subscribers US \$ 5,000
- > 50,000 < 99,999 lines/ >10,000 <30,000 subscribers 8,700
- > 100,000 lines/30,000 subscribers 15,000

International carriers 15,000

Affiliate Membership

Corporate Entities

- Small Revenues < US \$0.5M US \$ 1,200
- Medium Revenues > US \$0.5M but < US \$ 5M 2,000
- Large Revenues > US \$ 5M 3,600

Non Profit Organizations 600

Representatives:

1. Name: _____ Tel/Fax _____ Email _____

Title: _____

2. Name: _____ Tel/Fax _____ Email _____

Title: _____

Instructions:

1. Please submit a brief overview of your organization describing the nature of your business and your interest in the development of telecommunications in the Caribbean
2. Do not remit any fees to the Association with this application. You will be notified of your admission to membership in the appropriate category
3. Dues are payable on the 1st October of each year
4. Admission to membership is determined by the Board of Directors