**Membership Application Form**

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| --- | --- |
| 1. **Name of Company**
 | Company Name here |
| 1. **Registered Address:**
 | Address Line 1Address Line 2City |
| 1. **Telephone:**
 | Telephone Number Here |
| 1. **Website:**
 | Web Address here |
| 1. **Name of Company Liaison:**
 | First Name |  |
| 1. **Job title: ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­**
 | Job Title . |
| 1. **Email and Telephone/Mobile or Company Liaison:**
 | Liaison Email Address |
| Liaison Office Contact of Mobile |
| 1. **Name of Chief Executive Officer:**
 | First Name  | Last Name |
|  | CEO Email Address |
| 1. **Name of Chief Financial Officer:**
 | First Name | Last Name |
|  | CFO Email Address |

|  |  |
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| 1. **MEMBERSHIP**

**Type of Membership** (Please select one)1. **☐** Full Membership
	* Less than 100,000 subscriptions - US$4,500
	* 100,000 to 500,000 subscriptions – US$8,000
	* More than 500,000 subscriptions – US$15,000
 | **Telecommunication operating companies****Please insert your category** |
| 1. ☐ International carriers
 | **US $15,000** |
| 1. ☐ Int. Content Providers
 | **US $25,000** |
| 1. ☐ Affiliate Membership

 • Small – US$1,200  • Medium – US$2,000 • Large – US$3,600  | **Please select your category:****Small – Revenues - US < $0.5M****Medium - Revenues – US >$0.5M but < US $5M****Large- Revenues - > US $5M** |
| 1. ☐ Non-Profit Organization
 | **US $1,200** |

|  |  |
| --- | --- |
| 1. **COMPANY REGISTRATION**
 | Registration Number |
| Date Registered |

1. **What is customer’s reason for choosing this Association?**

|  |
| --- |
| Click here to enter text. |

1. **We the duly authorized representatives of Enter text here**

declare and confirm that the information given by us in this application for membership is true and correct. We promise to abide by the terms of this agreement, and we consent to the Association’s due diligence and verification procedures and to the retention of this application and all documents tendered by us by the Organization. The agreement will be used only for the purpose for which it was applied.

 **X**

 **NAME Customer’s Signature Date**

 **X**

 **NAME Customer’s Signature Date**

**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
5. **Membership automatically renews each year unless notification of withdrawal is submitted in writing.**

**Policy – Members’ Fees**

* New Members joining CANTO will be required to pay fees according to the financial year of the association, i.e. October 1 to September 30.
* Therefore, any fees paid within a year only cover the period up to 30 September and not beyond.
* New members joining during the months of April to July will be entitled to a 50% discount of the fees due, in that 1st year of joining
* New members joining during the months of August to September will be entitled to a 75% discount of the fees due, in that 1st year of joining
* A full year’s fee is due at the beginning of the next financial year.

**FOR INTERNAL USE ONLY Comments ­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­­**

 **X**

 Verified By: Date:

 **Documents required for all Company Accounts**

* Official letter on Organisation’s letterhead requesting membership

[ ]  YES [ ]  NO