



FORM No SUP/

**SUPPLIER APPLICATION
FOR MEMBERSHIP OF THE ITC-SA**

NAME:

SURNAME:

ID NUMBER:

NAME TO APPEAR ON CERTIFICATE:

STREET ADDRESS:

..... **CODE:**

POSTAL ADDRESS:

..... **CODE:**

TEL NO: () **CELL NO :** ()

E-MAIL ADDRESS:

REGIONAL PROXIMITY : **COMPANIES REGISTRATION NO :**

DATE:.....

I accept the ITC-SA Code of Conduct, and my signature on this document will bind me to the ITC-SA Disciplinary Code (as may be amended by the ITC-SA Board from time to time)

I undertake to pay the annual membership fee of R5000 (Ex VAT) P/A applicable (as may be amended by the ITC-SA Board from time to time)

Banking Details:
INSTITUTE FOR TIMBER CONSTRUCTION
ABSA - ISANDO BRANCH NUMBER 52-31-42
ACCOUNT NUMBER 010-2938-231-6

Signature of Applicant:

DATE: