

MEMBERSHIP APPLICATION FORM

Company Particulars

Name of Company:	
Business Address:	
Country:	Postal Code:
Tel:	Fax:
Email:	Website:
Company Registration No. (UEN No.):	
Person-In-Charge:	Designation:

MEMBERSHIP TYPE (Please tick ONE)

Ordinary
 Associate
 Individual

* Entrance Fee: S\$300 (One-time payment)

* Subscription Fee: S\$300 per annum

KEY OPERATIONS

Wholesaler
 Importer
 Exporter
 Engraving / Printing
 Embroidery
 Sell to Corporate Buyers
 Manufacturer
 Retail
 Others _____

PRODUCT LINES

Awards & Trophies
 Cups & Mugs
 Sports Accessories
 Badges Buttons
 Glass / Ceramic / Crystals
 Stationery / Writing Instruments
 Calendars
 Time Piece
 Toys & Stuffed Animals
 Diaries & Pocket Reminders
 Key tags
 Travel Products
 Electronic Products
 Magnetic Products
 Umbrellas
 Confectionery (Chocolates, Sweets)
 Office & Desk Products
 Wearable (Caps, Jackets, Shirts)
 Retail Gifts
 Handicrafts
 Housewares & Home Products
 Costume Jewellery
 Others _____

TERRITORY

Local
 Asia
 Australasia
 Europe
 US
 Middle East

MAIN ACCOUNTS TYPES

- | | | |
|--|---|--|
| <input type="radio"/> Advertising & Broadcast | <input type="radio"/> Chemical & Pharmaceutical | <input type="radio"/> Wholesalers |
| <input type="radio"/> Clubs, Associations | <input type="radio"/> Retail (Stores, Shopping Centres) | <input type="radio"/> Construction |
| <input type="radio"/> Financial Institutions (Banks) | <input type="radio"/> Professional (Doctors, Lawyers) | <input type="radio"/> Health, Medical & Fitness Services |
| <input type="radio"/> Government Agencies | <input type="radio"/> Marketing Services (Ad Agencies) | <input type="radio"/> Recreation (Theaters, Bowling) |
| <input type="radio"/> Schools, Universities | <input type="radio"/> Insurance, Property | <input type="radio"/> Automotive Dealers |
| <input type="radio"/> Biotech / Life Sciences | <input type="radio"/> Airlines | <input type="radio"/> Hospitality (Hotels, Resorts) |
| <input type="radio"/> Utilities (Electrical, Gas) | <input type="radio"/> Freight Forwarding Logistics | <input type="radio"/> Food & Beverage |
| <input type="radio"/> Electronics | <input type="radio"/> Exhibition / Events | <input type="radio"/> IT / InfoComm |
| <input type="radio"/> Human Resource | <input type="radio"/> Manufacturing | <input type="radio"/> Sports-Related (Soccer Teams) |
| <input type="radio"/> Trading & Distribution | <input type="radio"/> Petroleum Companies | <input type="radio"/> Others _____ |

SPECIAL SERVICES & FACILITIES FOR YOUR CLIENTS (Maximum FIVE)

- | | |
|--|---|
| <input type="radio"/> Specialty & premium fulfillment services | <input type="radio"/> Gift wrapping / packaging |
| <input type="radio"/> Art, design & layout | <input type="radio"/> Local imprinting and / or personalising |
| <input type="radio"/> Complete advertising agency services | <input type="radio"/> Printing |
| <input type="radio"/> Complete sales promotion agency services | <input type="radio"/> Warehousing and dropshipping |
| <input type="radio"/> Copywriting for letters, brochures, etc | <input type="radio"/> Delivery |

ANNUAL SALES VOLUME

Estimate \$ _____

YEAR ESTABLISHED

NUMBER OF EMPLOYEES

Full-Time: _____ Part-Time: _____

The primary person in your company to be contacted for announcement by PPGA:

Name / Designation: _____

Email: _____ HP: _____ DID: _____

I / We hereby agree to abide all the terms and conditions stated in this Application form. I/We understand that this Application shall be valid only when it is accepted and countersigned by the Promotional Products & Giftware Association.

 Applicant's Signature / Company Stamp

 Date

FOR OFFICIAL USE:
Proposed by: _____
Seconded by: _____
Approved by: _____
Date: _____
Membership ID No.: _____
Membership Expiry Date: _____

IMPORTANT:

- * Please return this application form together with your cheque payment.
- * Please issue cheque payable to: "Promotional Products & Giftware Association"