

MEMBERSHIP APPLICATION FORM

Company Particulars

Name of Company:

Business Address:

Country:

Postal:

Tel:

Fax:

Email:

Website:

Company Registration No. (RCB 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 make cheque payable to: "Promotional Products & Giftware Association"