

2025 / 2026 APPLICATION FORM- MAIN COMPANY/MAIN OFFICE

PLEASE FULFILL AND SEND BACK TO BUSINESS@FSACCI.COM

1/ REGISTER YOUR COMPANY IN FSACCI NETWORK

| THE COMPANY | | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|--|--|
| Company Name: | | | |
| Company Address: | | | |
| | | | |
| VAT Registration number: | | | |
| | | | |
| FSACCI MAIN CONTACT | | | |
| Full name: | Position: | | |
| Phone Number (s): | E-mail: | | |
| | | | |
| SOCIAL MEDIA | | | |
| LinkedIn: | Instagram: | | |
| Twitter: | Facebook: | | |
| | | | |
| 2/ NETWORK WITH US | | | |
| FSACCI provides you the option to provide two different contact types : - WEB DIRECTORY MEMBERS CONTACTS: the contacts will be published on our web directory. Only FSACCI Members will have access to their contact details (email and phone). - FSACCI DATABASE CONTACTS: The contacts of your staff Members that will have access to the web directory and receive our informations will not be communicated to a third party. | | | |
| Each contact you provide will be able to create a password that allows him/her to access its contact details in our private portal. In the respect of POPI Act and GRDP, each contact will, therefore, be able to view, amend or delete his/her details in. All data stored by FSACCI is in the care of the General Manager, Erwanne MEILHOC. | | | |
| FSACCI WEB DIRECTORY MEMBERS CONTACTS | | | |
| We would like the FSACCI MAIN CONTACT to be the MEMBERS CONTACT. | | | |
| ≥ MEMBERS CONTACT #1 | | | |
| Name: | Position: | | |
| Phone Number (s): | E-mail: | | |

> MEMBERS CONTACT Name: Position:

| Phone Number (s): | E-mail: |
|--------------------------|---------|
| | |
| FSACCI DATABASE CONTACTS | |
| <u>> CEO</u> | |
| Name: | E-mail: |
| ≥ <u>P.A. to CEO</u> | |
| Name: | E-mail: |
| ≥ Marketing | |
| Name: | E-mail: |
| > HR Manager | |
| Name: | E-mail: |
| > Finance manager | |
| Name: | E-mail: |
| > <u>Legal Manager</u> | |
| Name: | E-mail: |
| > Procurement Manager | |
| Name: | E-mail: |
| ≥ <u>Other</u> | |
| Name: | E-mail: |
| ≥ Other | |
| Name: | E-mail: |
| ≥ <u>Other</u> | |
| Name: | E-mail: |

MEMBERSHIP LEVEL

*Please circle the applicable category

| | PLATINUM | GOLD More than 20 employees | SILVER 3 to 20 employees Exclusive to SME | BRONZE 1 to 3 employees |
|----------------------------------------------------|----------|-----------------------------------|-------------------------------------------------|----------------------------|
| Annual Membership fee exc VAT | R 43 200 | R 17 300 | R 5 940 | R 2 370 |
| Registration fees exc VAT (only 1st year) | R 1 500 | R 500 | R 200 | R 200 |

PRO-RATA MEMBERSHIP FEE IN THE YEAR OF ENTRY:

- ≥ Registration from 01 July: 60% of respective annual membership fee + registration fee + an added commitment for re-registration for the following year in its entirety.
- > Registration from 01 October: Annual membership fee for the following Year included + registration fee

| PAYMENTS DETAILS We would like the FSACCI MAIN CONTACT to be our billing co | ntact |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ≥ OTHER BILLING CONTACT | |
| Name: | Position: |
| Phone Number (s): | E-mail: |
| ≥ PAYMENT DETAILS: | |
| BANK: ABSA BRANCH: 632005 ROSEBANK CENTRAL ACC NUMBER: 4054573940 | |
| <u>LEGAL</u> | |
| Please note, all memberships are subject to the approval of the Board. Refer to the MOI (<u>here</u>) for further details. By signing this membership of the FSACCI as stipulated on the website, but you also agree to notifications, monthly newsletter and any other FSACCI communopportunities and business services). Your contact information will be stored on our data base system, which delete your contact information. All data stored by FSACCI is in the call | , you agree not only to the Ts & Cs and the MO receiving the FSACCI communication (even incation about membership news, networking the you will have full access to view, amended o |
| I Agree Signature: | Date: |