

## MEMBERSHIP APPLICATION FORM (1 October 2024 to 30 September 2025)

MEMBERSHIP CATEGORY

REGIONAL SUPPLIER	A kitchen industry supplier (a company that supplied goods or services into the kitchen industry) who wishes to be a member in one or two regions and not nationally.		
PART 1:			
How did you hear about the KSA?			
Why do you wish to become a KSA member?			
PART 2:			
Registered name of company:			
Trading as:			
Company registration number:	Company VAT number:		
Physical Address:			
Postal Address:	Code:		
Tel:	Fax:		
Email:	Website:		
Names of Directors / Owners / Partners:			
Have any of the above people been a director /	owner / partner in a company or cc that has gone insolvent:		
W 1			
If yes please supply details:			
Duration of husiness:	Number of showrooms/ branches:		
Duradon or publicas.	Number of Showlooms/ branches.		
Address of extra showrooms / branches:			

PART 2 (continued):						
Who will the KSA's key contact	at your company be?		Position:			
Cell:		Email:				
Please supply a brief description	on of your company's product and what	t you specialise in:				
PART 3:						
	ice based? Gauteng: KwaZulu	-Natal: Cape Town:				
	REGION YOU WOULD LIKE TO R					
Physical Address:						
			Code:			
Postal Address:			Code:			
Tel:		Fax:				
Email:		Website:				
KSA's key contact person:			Email:			
Cell.		EIIIdii.				
PART 4:						
Trade references - people with indicated below):	nin the industry with whom you have	a COD or account history (please	e supply complete details for the	ree referees as		
COMPANY NAME	CONTACT PERSON	TEL & FAX	EMAIL			
			I			
COMPANY BANK DETAILS	<b>5:</b>					
Bank:		Branch:				
Account no:		Branch Code:				
Contact person in your organis	ation for submission of KSA accounts:					
Contact Number:		Email:				

## PART 4 (continued):

## **SUBSCRIPTIONS:**

CATEGORY	ONCE OFF ENTRANCE FEE (INCL. VAT)	ANNUAL SUBSCRIPTIONS (INCL. VAT)	TOTAL (INCL. VAT)
REGIONAL SUPPLIER	R 2,781.00	R 11,718.00	R14,499.00

- · Please note: Subscriptions are assessed annually and may be increased from time to time.
- · Please note: Entrance fees are once off and payable in full immediately after your membership is confirmed.
- Please note: Your first subscriptions invoice must be paid in full on acknowledgment of membership acceptance. Your membership will not be listed until your first subscriptions invoice has been paid in full.
- Please note that the monthly subscriptions payment option is not available in your first year of membership. You may only apply for monthly payment of subscriptions after a full year of membership and if your first year's subscriptions were paid within the specified time period.

PLEAS	SE SUPPLY THE FOLLOWING WITH YOUR APPLICATION:
	Company registration papers
	Company letterhead
	Tax Clearance certificate
	Letter of good standing from Workman's compensation
	Proof of BIBC / FIBC registration if applicable
	Copy of your T&C's / contract
	Details of your guarantee / warranty
PART	5: Terms & Conditions
membe guidelii	rms and conditions of KSA membership are set out in the KSA's Memorandum of Association and rules and guidelines as stated in the KSA's er's handbook. In signing this document you agree that should your application be successful you accept and will abide by these rules and nes as well as the KSA's Code of Conduct and Code of Ethics. A link to view these documents should have been sent to you with this application Should you not have received the link it is the responsibility of the applicant to request that the link be resent.
	SA's rules and guidelines are part of a fluid document and are updated on a regular basis. It is the responsibility of the member or the applicant ure they apprise themselves of the most recent version of the document.
In com	pleting this application form I confirm acceptance of the KSA's Privacy Policy and POPI protocols as noted in the KSA's member handbook.
I confir	rm I have received, read and understood the following documents relevant to this application:
	KSA Member Handbook of Rules & Guidelines KSA Code of Ethics
	KSA Code of Conduct
I HAV	E READ AND UNDERSTAND THE ABOVE TERMS & CONDITIONS.
Signatu	ure:Name:
_	
Docitio	Date: