

CORPORATE MEMBERSHIP APPLICATION FORM



1. Company Details:

Organization/Company name: _____

Tel. Number(s): _____ Company Email: _____

Company Postal Address: _____ Postal Code _____

Company Physical Address: _____

Is your organization public listed?

☐ Not Listed ☐ Listed

*Type of Industry (Tick more than one if applicable):

- | | | | |
|--|--|---|---|
| <input type="checkbox"/> Manufacturing | <input type="checkbox"/> Public Administration & Education | <input type="checkbox"/> Transport & Storage | <input type="checkbox"/> Other Social and Personal Services |
| <input type="checkbox"/> Building & Construction | <input type="checkbox"/> Financial & Insurance Service | <input type="checkbox"/> Professional Services | <input type="checkbox"/> Administrative & Support Services |
| <input type="checkbox"/> Whole Sale & retail Trade | <input type="checkbox"/> Accommodation & Food Services | <input type="checkbox"/> Information & Communications | <input type="checkbox"/> Health & Social Services |
| <input type="checkbox"/> Real Estate | <input type="checkbox"/> Other (Please Specify) _____ | | |

*Employee Population

☐ 1 - 20 ☐ 21 - 100 ☐ 101 - 500 ☐ 501 - 1000 ☐ Over 1000

2. Corporate Membership Fee

Period	Fee Basis				
	Large Corporations/ Listed Companies	Large SMEs	Medium SMEs	Small SMEs	NGO's/Non Profits
<input type="checkbox"/> 1 st Year	Kes 100,000	Kes 80,000	Kes 50,000	Kes 30,000	Kes 60,000
<input type="checkbox"/> For 2 Years	Kes 200,000	Kes 160,000	Kes 100,000	Kes 60,000	Kes 120,000
<input type="checkbox"/> For 3 Years (10% Discount)	Kes 270,000	Kes 216,000	Kes 135,000	Kes 81,000	Kes 162,000
<input type="checkbox"/> For 5 Years (15% Discount)	Kes 425,000	Kes 340,000	Kes 212,000	Kes 127,000	Kes 204,000

Please make Cheque Payable to: **Institute of Directors (Kenya)**

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3. Board Information

Please attach a list of the Company's current Board members and their membership in the various board committees

4. Contact Person

On behalf of my organization, I hereby apply for corporate membership of the Institute of Directors (Kenya) and agree that we meet the general criteria for corporate membership of the IoD (K). I confirm that the information provided above is true and correct.

Signature:

Company Stamp:

Name:

Designation:

Date:

Kindly return this form to: **The Institute of Directors (Kenya)**

All Africa Conference of Churches, Waiyaki Way, Westlands

P.O. Box 13490 - 00800 Nairobi, Kenya

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Email: msd@iodkenya.co.ke