

Why still waiting when your entrepreneurial dreams are within your reach?

Take advantage of our **PAY AFTER SERVICE** for CAC Incorporation of Business/ Company and NGO's

### REGISTER YOUR BUSINESS with CAC (Corporate Affairs Commission)

**REQUIREMENT FOR INCORPORATED TRUSTEE REGISTRATION (FOUNDATIONS, ASSOCIATIONS, SOCIAL/CULTURAL CLUBS, RELIGIOUS, ETC)**

|  |  |  |
| --- | --- | --- |
| **SECTION A --- ORGANISATION DETAILS** | | |
| 1 | Proposed Organisation Name 1 |  |
|  |
| 2 | Proposed Organisation Name 2 |  |
| 3 | Proposed Organisation Name 3 |  |
| 4 | Office Address |  |
| 5 | Contact Number |  |
|  |
|  |
| 6 | Email Address |  |
| 7 | Aim : |  |
| 8 | Objectives |  |
|  | I.  ii.  iii.  iv.  v |  |
|  |  |  |
| 9 | Organisation Constitution |  |
|  |  |  |
| 10 | Minimum number of Trustee |  |
| 11 | Maximum number of Trustee |  |
| 12 | Custodian of Common seal |  |
| 13 | Trustee Tenure |  |
| 14 | Governing body |  |
| 15 | Application of Funds |  |
| 16 | Keeping Accounts |  |
| 17 | Meetings |  |
| 18 | Source of income |  |
|  |  |  |
| **SECTION B — TRUSTEE DETAILS** | | |
|  | Trustee 1 |  |
| 19 | National ID card (Scan or Snap and Send) |  |
| 20 | Passport Photograph (Scan, Snap and Send) |  |
| 21 | Signature (Scan,Snap and Send |  |
| 22 | Date of Birth |  |
| 23 | Gender |  |
| 24 | Occupation |  |
| 25 | Email Address |  |
| 26 | Contact Number |  |
| 27 | Contact Address (House No, Street Name, Town, LGA, State. Please, ensure you provide address in this format |  |
|  |  |  |
|  | TRUSTEE 2 |  |
|  | Means of ID (Scan or Snap and Send) |  |
|  | Passport Photograph (Scan or Snap and Send) |  |
|  | Signature (Scan or Snap and Send) |  |
|  | Date of Birth |  |
|  | Gender |  |
|  | Occupation |  |
|  | Email Address |  |
|  | Phone Number |  |
|  | Contact Address (House No, Street Name, Town, LGA, State. Please, ensure you provide address in this format) |  |
|  | NOTE:\*  1. Kindly replicate Trustee information if more than two (2) Trustees.  2. Specify which Trustee is the CHAIRMAN  3. Specify which Trustee is the SECRETARY  4. If the secretary is not a Trustee, specify.  5. The minimum number of trustee is two (2) |  |
| **SECTION C --- ORGANISATION RANKINGS** | | |
| 14 | Chairman Full Name |  |
| 15 | Secretary Full Name |  |
| 16 |  |  |
| 17 |  |  |
| 18 |  |  |

**Welcome to Metripreneur Consult! Please complete the form above and submit it to** [***metripreneur-consult@gmail.com***](mailto:metripreneur-consult@gmail.com)**. Once we receive your submission, our team will begin working with the information you've provided. Please note that our focus is on the data (information) you submit.**