

The information must be provided as part of the engagement process for associate programme.

USER INFORMATION

FIRST NAME _____

LAST NAME _____

NAME OF ESTABLISHMENT _____

MOBILE _____

TELEPHONE _____

EMAIL _____

LOCATION _____

COUNTRY _____

BANK INFORMATION

MEMBERSHIP FEE: \$ 999

MODE OF PAYMENT

☐ CASH ☐ CHEQUE ☐ CARD ☐ TRANSFER

BANK NAME _____

ACCOUNT NUMBER _____

SIGNATURE _____

NAME _____

STAMP

Date _____

MANDATORY CHECKS

Years in Business _____

Number of Clients/ Customer _____

Status Verification

Name and or identity search conducted using prescribed "special Reference Listing" eg. Sanction lists, PEP list, Blacklist etc.?

Status Verification ☐ Yes ☐ No

Name and Address Verification for corporate body

Name and registered address verified and supported by one of the following accepted documents.

- ☐ Trade License
- ☐ Certificate of Incorporation
- ☐ Partnership deed
- ☐ Certificate from the Registrar/ Good Standing Certificate
- ☐ Proof of Expertise
- ☐ Proof of Deliverables

FTA DETAILS

TRN CERTIFICATE _____

REFERENCE 1

NAME _____

EMAIL _____

PHONE _____

REFERENCE 2

NAME _____

EMAIL _____

PHONE _____

Terms and Conditions:

1. MAGAS reserves right to reject application if the verification results are not satisfactory.
2. By signing this form, you agree to the Terms Of Use of MAGAS as given on its portal.