**APPLICATION FORM FOR INDIVIDUAL MEMBERSHIP**

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| 1. Full name of Applicant: ………………………………………………………….. | |
| 2. Passport Number: ……………………… | Date of Issue: ………………………… |
| 3. Valid Up to: ………………………… | Place of Issue: ……………………… |
| 4. Date of Birth: …………………………… | 5. Nationality: …………………….. |

1. INCHAM Membership under HCMC or HANOI, please confirm: …………….
2. Name of Organization & Designation: …………….…………….………………
3. Area of business: …………….…………….…………….…………….…...……
4. Office address in Vietnam: …………….…………….…………………….……

Tel: …………………………………… Fax: ………………………………………

Email: ………………………………………..

11. Authorized Nominee to Represent and Contact Address (If Any):

Tel: …………………………………… Fax: ………………………………………

Email: ………………………………………..

12. Address of Head Office:

Tel: …………………………………… Fax: ………………………………………

Email: ………………………………………..

Signature: Date:

NAME of Applicant: