



SMALL EXPORTERS ASSOCIATION

No.220-A10, Mareeswari Complex, Near SFR College, SIVAKASI - 626123.
Virudhunagar Dist. Tamilnadu. Cell : 9367423299 / 9677637725 | E-mail : seasivakasi@gmail.com

Enrollment No.

To. The Chairman, I/We are Request you to Join me as a member of SMALL EXPORTERS ASSOCIATION

1. NAME OF THE COMPANY :
2. NAME OF THE APPLICANT :
3. GENDER : MALE FEMALE D.O.B :
4. QUALIFICATION : _____
5. COMMUNICATION ADDRESS : _____

6. EMAIL : Web :
7. MOBILE No :
8. OCCUPATION : BUSINESS EMPLOYEE FRESH STUDENT
9. DESIGNATION : PROPRIETOR PARTNER MANAGER
10. BUSINESS REGISTRATION : MSME TIN & CST IEC
11. COMPANY STYLE : MANUFACTURING TRADING SERVICE
12. TYPE OF INDUSTRY & BUSINESS :
13. INTERESTED IN : EXPORT IMPORT DOMESTIC BOTH
14. PRODUCTS YOU WANT TO TRADE : 1. 2. 3.
15. MEMBERSHIP WITH ANY OTHERS : YES NO IF YES SPECIFY
16. Your Expectations From **SEA** : 1. 2.
3. 4.
17. INTRODUCED BY : Mob : Member ID
18. INTRODUCER CONCERN NAME : City :
19. YOUR REFERAL BUSINESS FRIENDS : Mob Mob

DECLARATION

I / WE ARE VERY INTERESTED TO JOIN AS A MEMBER OF SMALL EXPORTERS ASSOCIATION, SIVAKASI. I / WE ARE PREPARED TO ABIDE BY THE RULES AND REGULATIONS OF THE ASSOCIATION.I/WE ARE DECLARE THAT ABOVE DETAILS ARE GIVEN BY THE BEST OF MY KNOWLEDGE.

PLACE :

DATE :

SIGNATURE WITH COMPANY SEAL

APPROVED & VERIFIED BY SEA SIVAKASI,

CHAIRMAN