

MEMBERSHIP

APPLICATION FORM

☐ Please complete Part 1 and Part 2 of this form.

PART 1

Name of Legal Entity	:				
Postal Address	:				
Website	:		Phone	:	
Main Business Activity	:	☐ Management Companies	☐ Audit/Accounting Firms	☐ Banks	
		☐ Licensees under Securities Act	☐ Law Firms	☐ Others	
Licensed By	:	☐ FSC	☐ BOM	☐ Others	Please specify:
					Please specify:

Company Contact Details**Primary Contact**

Name	:	
Email	:	

Secondary Contact

Name	:	
Email	:	

Number of Employees: _____

PART 2

Declaration:

Please tick the declarations which are applicable.

I /We hereby declare that:

1.	☐	Our licence is currently valid and complies with the provisions of the Financial Services Act 2007, as amended or any other legislation and regulation applicable to the licensee.
2.	☐	All required KYC documents in support of this application will be submitted.
3.	☐	I /We have not been subject to disciplinary action, at any time, by any Regulatory Authority, whether in Mauritius or overseas. If yes provide details: ----- -----
4.	☐	I /We undertake to adhere thereto, at all times and agree to be bound by the membership terms and conditions and undertake to settle all subscriptions and other dues in accordance with the Constitution of the Company.

Signature: _____

Name: _____

Date: _____

More Information

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