



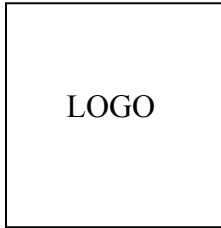
**MEMBERSHIP FORM  
CORPORATE MEMBERSHIP APPLICATION FORM**

Please fill the form and submit it to **MSK Centre 47' Muchai Drive off Ngong road  
P.O. Box 69826-00400 Nairobi. Tel: 020-2627684 Cell: 0792001391/0775823369  
Website: [www.msk.co.ke](http://www.msk.co.ke) Email: [info@msk.co.ke](mailto:info@msk.co.ke) or [training@msk.co.ke](mailto:training@msk.co.ke)**

**Please attach organization's logo.**

1. Name of the Company: -----  
P.O Box: -----  
Telephone Number:-----  
Fax: -----  
General Email  
Address.....  
Date of Establishment:-----  
Principal Activity:.....  
Physical Address-----  
Brief Description of Business the firm is involved in (Attach Company Profile)  
.....  
.....  
.....  
Date of registration..... Turnover.....

Company Logo



**2. Accredited Representatives to the Marketing Society of Kenya (Please give 3 names)**

Surname..... Other Names.....  
Position.....E- Mail Address.....  
2. Surname..... Other Names.....  
Position.....E- Mail Address.....  
3. Surname..... Other Names.....  
Position.....E- Mail Address.....

**3.) Declaration:**

I wish this application for **Corporate Membership** to be considered by the Executive council of the Marketing Society of Kenya and I undertake to abide by the rules of the society, the MSK code ethics and the professional conduct as well as the advertising standard code. I understand that submission of this form and attached Cheque No: ----- for Kshs: ----- is in no way binding to the Society or its officers and that in the event of my application not proving successful my cheque will be returned to me.

Once registered as a member of the society I'm bound to pay my annual subscription unless I have been expelled from the society or have submitted my resignation in writing to the MSK Secretariat before the annual subscription is due..

Signed:  
Name.....Position.....  
Signature.....Date.....

**Approved**

Signature.....Date.....  
For Marketing Society of Kenya