

MEMBERSHIP FORM

If you would like to become a member of the Middle East Publishers' Association, or would like to renew your membership, complete the form below, check the new or renewing box, then send it to MEPA, along with your cheque for the appropriate amount. (Note: Credit Card Payment is also accepted; please see Payment Terms in Page No. 3)

Date	
COMPANY	'S DETAILS
Company	
CEO	
Name of the	Representative of the Company
Address	
City	Country ZIP
Work Phone	Work Fax
E-Mail	
Web Site	
Country of Re	

PUBLICATIONS' DETAILS

·	Small Me	edium Large	e 16 and more
NAME OF THE PUBLICATION	LANGUAGE	PERIODICITY	NATURE OF PUBLICATION
-			
1			
Please supply a brief resume in no	t more than 50 words	s about your company	

MEMBERSHIP DETAILS

MEMBERSHIP TYPE		MEMBERSHIP CLASS				
O New	0	Founding Membership	AED 50,000/-			
Renewing	0	Full Membership	AED 2,500/-			
PAYMENT TERMS	S					
Cheque	Amount					
	Cheque No.					
	Bank Name					
	Br/Country					
Credit Card						
Master C Amount Bank Name	Card O Visa Card	O Others (Specify)				
Credit Card No.						
Expiry Date						
DECLARATION I hereby certify that the above information provided on this application is true and correct.						
Signature Over Printed Name :						
Date :						