



Sri Lanka Apparel Brands Association

Membership Form

Details of the company

Company Name: _____

Full Name: _____

Company Address: _____

Street Address

City

State

ZIP Code

Phone: _____ Email _____

Fax Number: _____

Brand Names: _____

Product Description _____

Business Description _____

No of employees: _____

No of Machines: _____

Annual turnover in pieces: _____

Annual turnover in Rupees _____

Percentage of _____

local sales over production: _____

Other comments _____

Details of the representative

Full Name: _____

Designation: _____

Mobile Number: _____ Email _____

Fax Number: _____

Signature: _____ Date: _____

For office use only

Payment Cash Cheque

Amount: _____ Cheque Number: _____

Bank: _____

Payment Details

Annual subscription fee : Less than 50 employees : Rs 10,000
More than 50 employees : Rs 15,000

Additional one-time payment : Rs 35,000