**AARG TRADE DATABASE**

**REGISTRATION FORM**

**FORM INSTRUCTIONS:** Please type all text in Sentence Case. Kindly use an ‘X’ for making selections. Completed forms to be emailed to trade@aargconference.com.

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| **SECTION A: COMPANY DETAILS** |
| Registered Name | All Africa Rastafari Gathering |
| Trading Name (If different) |  |
| Registration Number |  | Registration Date | 2020/ |
| Registration Type | Sole Proprietor |  | Close Corporation |  | Pty Ltd |  | Co-Operative |  |
| Business Physical Address |  |
|  |
| Business Postal Address |  |
|  |
| Business E-Mail Address |  |
| Contact Number | Landline |  | Mobile |  |
| Organization Website |  |
| Facebook Page |  |
| LinkedIn |  |
| Twitter Handle |  | Instagram Handle |  |
|  |
| Field / Industry |  |
| Business Sector |  |
| Services Rendered |  |
|  |
|  |
|  |
|  |
| Capacity | Informal Trader |  | Small Business |  | MediumEnterprise |  |
| How many years has your business been operating? |  | Income Tax Number |  |
| What do you hope to achieve by registering on this database? |  |
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|  |
| Are you employed and running your business separately? *(Employed)* |  | Are you employed by and running your business full-time *(self-employed)* |  |
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| **SECTION B: PERSONAL DETAILS** |
| Cultural Name |  |
| Name and Surname *(as on ID)* |  |
| Natural Role\* *(Put an X)* | Man |  | Woman |  | Date of Birth\* | 1892-07-23 |
| Residential Area\* |  |
| Mobile Number |  |
| Company Designation/Title |  |
| Education Level |  |
| Relevant Business Skills |  |
|  |
|  |
|  |
| \**For statistical purposes only.* |

Applications will be processed within 14 working days of receipt. Successful applicants will be contacted via e-mail or SMS. All applications to be accompanied by relevant company documents, except for informal traders where membership with the South African Informal Traders Alliance is recommended but not compulsory.

**DOCUMENT CHECKLIST (for registered businesses only):**

1. Company Registration Document
2. B-BBEE Certificate / EME Letter
3. Tax Clearance Certificate
4. ID Documents of Company Representatives
5. Company Profile
6. Relevant Industry Accreditation (If applicable)
7. Company Logo (JPEG Image or PDF document)

**I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Insert full name), of ID No. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, being duly authorised to represent \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Insert Business Name), Business Registration No.\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby declare that the information provided in this application form and the attached documents are true and correct.**

|  |  |
| --- | --- |
| **Applicant’s Signature** |  |
| **Date of Application** |  |

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| **FOR OFFICIAL USE ONLY** |
| RECEIVED BY |  |
| DATE OF RECEIPT |  |
| COMMENTS/REMARKS |  |