

Membership Registration form

To apply for membership, please complete and return this form to eiod@fra.gov.eg at the Egyptian Institute

Personal Details:

Name (Underline Surname):.....
 Title: ☐ Dr ☐ Mr. ☐ Mrs. ☐ Ms. ☐ Other
 Nationality:.....
 Education qualifications:.....
 Gender: ☐ Male ☐ Female
 Marital status:.....
 Home Address:.....
 Tel:.....
 Mobile:
 Fax:
 E-mail:.....

Business Details:

Company/Organization name:.....
 Type of business: ☐ Owned Business ☐ International Company
 Position:.....
 Company Address:

 Tel:.....
 Fax:
 E-mail:.....
 Is your company listed: ☐ Yes ☐ No
 Work experience: previous company/ies / job title / no. of years:.....

 How many years have you: ☐ Been a director:.....
☐ Reported to a board:.....
 Business Fields: ☐ Engineering ☐ Textile ☐ Core
☐ Automobile ☐ Bio-Tech ☐ Finance
☐ Infrastructure ☐ Chemical ☐ IT
☐ Other (please specify).....

Preferred correspondence Address: ☐ Home ☐ Business

Preferred E-mail Address: ☐ Private ☐ Business

Please sign me up to receive news from the EIOD by email
 (if you do not tick this box we will only use your email address for administrative purposes)

Have you attended any EIOD's events?
☐ No ☐ Yes (if yes; when & course title)

KINDS AND DETAILS OF EIOD MEMBERSHIP

Individual Membership

Entry to the category of individual member shall be for persons who meet the following criteria:

1. Minimum of 21 years old.
2. Holds at least a Bachelor degree.
3. Have at least 2 years of professional experience.

Individual Membership fees:

Registration fees (paid once): LE 3,000

Annual fees: LE 5,000

Corporate Membership

Entry to the category of corporate members shall be by application for corporations and their board members. Holding a corporate membership entitles the company to enroll 3 of its board members or top executives. The company has the right to change the nominated representatives when it renews its membership. The applying company should meet the following criteria:

1. Be a registered company
2. Have active operations

Corporate Membership fees:

Registration fees (paid once): LE 5,000

Annual fees: LE 20,000

Type of Membership required:

☐ Individual ☐ Corporate

Please check Privacy and disclosure statement hereunder

Date: / /

Your Signature: x.....

Privacy and Disclosure

Members may choose to have their names and companies available to third parties (with contact details optional) on the members' area of EloD's website:

☐ yes, I would like to have my name and company available to others on the members' only area of the EloD's website

☐ yes, I would like to have my contact details published on the EloD's website with my name, please tick one or more:

☐ postal address ☐ e-mail address ☐ Fax ☐ business phone ☐ mobile

I hereby apply to be a member of the EloD, and agree to abide by all the EloD's code of ethics as amended from time to time. I confirm that I do not have any criminal convictions and that I am not bankrupt and that I am not disqualified by court order from being a director. I undertake to conduct myself both publicly and within the premises of the institute, in a manner which would be expected of a member of a reputable professional body. I also agree to pay the registration and the annual subscription fees. I acknowledge that:

(a) I enable the EloD to:

(i) administer and maintain my membership, and provide me with all of its membership services;

(ii) provide me with advice and information concerning products and services that the EloD believes may be of interest;

(iii) communicate with me for any purpose

(b) If I fail to provide any information requested in this application, the EloD may decline my application.

(c) I give the EloD permission to verify any qualifications and/or details I have supplied.

(d) I have the right to obtain access to and request correction of any personal information held by the EloD.

I have read and agree with the privacy and disclosure statement as detailed above and hereby apply for membership.

Signature ----- date -----