



MALAWI INTERNATIONAL ARBITRATION CENTRE

Membership Application Form

	Criteria	Description
1.	Full Name of Applicant	
2.	Nature of Applicant (Plc/Company/Partnership/SOE)	
3.	Date of registration(provide copy of certificate where applicable)	
4.	Date or Year of Commencement of Operation in Business	
5.	Names and Contact Details(phone number/email) of at least 2 key current Directors/Partners/Other officials of the Applicant:	
	(i)	
	(ii)	
	(iii)	
6.	Nature of the Business or Professional Practice	
7.	Industry Regulator	
8.	Proof of good standing with the industry regulator (provide copy where applicable)	
9.	Location of Head/Principal office	
10.	Proof of Compliance with Tax Requirements(supply copy of recent tax clearance if available)	

I HEREBY certify that the information given above is accurate concerning the Applicant and present it to be considered for inclusion of the Applicant among the Members of the Centre
Name.....Signature.....dated this.....2024