



# Uganda Manufacturers Association

## MEMBERSHIP APPLICATION FORM

### IMPORTANT

- *This application form is for Ordinary, Associate, and Affiliated membership category as per the Statutes of UMA. Please, be aware of the different requirements with respect of level of information.*
- *The application should be filled in duplicate; one copy to be retained by the company and the other submitted to UMA.*
- *Make sure that two UMA members or reputable Institution e.g. your banker, sign as referees on the application form and that they append their official company stamps alongside their signatures. (The Members' list can be accessed on the UMA website i.e. [www.uma.or.ug](http://www.uma.or.ug) )*
- *For the Turnover and Invested Capital, please quote the audited accounts and balance sheet of the last financial year where possible.*
- *Please note that the information you provide in this form will be treated as confidential. The information in Section I and II (Nos. 1-3) will be used for the UMA Website and Membership Directory, and the rest is on ly for UMA and strictly confidential.*

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### SECTION I

Name of Company .....

Head Office – Physical Address .....

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P.O. Box: .....

Telephone Nos: .....

Fax No: .....

E-mail Address: .....

Web Site: .....

<p>Lugogo Show Grounds P.O. Box 6966, Kampala E-mail: <a href="mailto:membership@uma.or.ug">membership@uma.or.ug</a></p>	<p>Tel: +256-41-287615/2 +256-41-221034 Fax: +256-41-220285</p>	<p>Director Finance &amp; Administration – 0312278820 Director Membership Services – 0312278822 Director Business Unit - 0312278821</p>
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**SECTION II**

1. Nature of Business: .....

2. Physical Location: .....

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3. Primary products you produce and their brand names:

	Product Name	Tariff Code (H.S)	Brand Name
1			
2			
3			
4			
5			

4. When was the business established? .....

5. Type of Ownership (a) Limited Company, Private/Public .....

(b) Partnership .....

6. Full names and Nationality of the company Director/Partner at the date of this application:

	Full names	Nationality
1		
2		
3		
4		
5		
6		

7. Names and Contacts of the Managers:

Position	Name	E-mail	Phone
Managing Director			
Finance Manager			
Production Manager			
Export Manager			
Administration Manager			
Other:			

8. **Structure of Annual Membership Fee<sup>1</sup>**

Annual membership fee is based on the company's turnover, invested capital, and total labour force. Membership structure/category comprises of Small scale, Medium scale, Large scale, and Corporate.

9. **Capital Investment: (Plant & Machinery).**

In Ugandan Shillings	Tick
Below 100 million	
101-200 million	
201 – 300 million	
301 – 400 million	
401 – 500 million	
501 million and above	

**10. Annual Turnover**

<b>In Ugandan Shillings</b>	<b>Tick</b>
Below 100 million	
101-200 million	
201 – 300 million	
301 400 million	
401 – 500 million	
501 million and above	

**11. Labour Force (Number of workers employed)**

<b>Total</b>	<b>Tick</b>
Below 100 people	
101 - 200 people	
201 – 300 people	
301 – 100 people	
401 – 500 people	
501 people and above	

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**<sup>1</sup> Please skip nos. 9-11 if you are applying for Affiliated Association Membership as the level of subscription fee will be decided upon individual assessment**

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**SECTION III**

**12 Referee I**

Name of the Company: .....

Signature: .....

Date: .....

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(Company Stamp)

**13 Referee II**

Name of the Company: .....

Signature: .....

Date: .....

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(Company Stamp)

**NB: Please use your banker or any UMA registered member company (can refer to UMA directory/website/UMA administration offices)**

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**DOCUMENT TO BE ATTACHED**

**a) Copy of license(s) held**

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**DECLARATION**

*I/We confirm that the information given above is correct, and may be utilized by the UMA in conjunction with the information provided by other UMA members to compile industry data which the Association may use to support industry briefs, position papers and submissions to government and relevant Business Support Organisations. I/We agree to be bound by the memorandum and articles of UMA and any rules there under which are now or may at any time be in force; to notify Uganda Manufacturers Association of any changes in Directors/Partners of our company/firm during the period of our membership of the Association and also to notify the association of any other changes on any information given in the application form including turnover, invested capital and labour force.*

I hereby declare that the information given above is complete and correct.

Full name: .....

Designation: .....

Signature: ..... Date: .....

**For and on behalf of our Company**