



Lifetime Special Member Application Form

The Director-General

Confederation of Asia-Pacific Chambers of Commerce and Industry

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I/We have the honor to apply as a **Lifetime Special Member** of the Confederation of Asia-Pacific Chambers of Commerce and Industry (CACCI), and hereby agree to abide by our obligations and responsibilities as a member. Please bill me for my membership fee, which I understand will be paid only once.

Name of Company / Individual: _____

Address: _____

Telephone: _____ Fax: _____

Email: _____ Website: _____

Nature of Business: _____

Company's Name

Title / Position

Date Registered or Established: _____

Chamber Affiliations - National: _____

Local: _____

Date

Signature above printed name

Position

28 member countries

50 member chambers of commerce and industry

More than 300 special lifetime members