



SAGMA

Access to affordable quality medicines

Southern African Generic Medicines Association

APPLICATION FOR MEMBERSHIP

I. Enterprise/Company/Association Details

Trading Name:
Postal Address:.....
Physical Address:
Phone/Fax/E-mail:.....
Registered or Legal Name /Entity:
Year established / Commencement Date:.....
Business Registration Number:
Names of Directors:
Names of Shareholders / Partners:

II. Contact Person

If elected to membership, indicate name of representative, to whom correspondence must be directed together with the name of an alternate who may act for the representative in his absence

REPRESENTATIVE

Name:
Position:
Contact Details:

ALTERNATE

Name:
Position:
Contact Details:

III. Business Activities

List types of products manufactured and/or sold and/or represented – (fine chemicals: tablets: capsules: ointments and creams: small volume parenterals: large volume parenterals: veterinary products: consumer products)

Manufacturer of:	Trade in:	Services:
1.	1.	1.
2.	2.	2.
3.	3.	3.

Physical address: 77 Meintjies Street, Sunnyside, Pretoria, South Africa
Postal Address: P.O. Box 28695, Pretoria, 0132, South Africa
Telephone: +27 12 394 5546, Fax: +27 865 422 028
Email: sagma@sagma.net, website: www.sagma.net

Board Members: Emmanuel Mujuru (Chair, Zimbabwe), Scott Senwelo (Vice-Chairperson, Botswana) Lisa Ramakrishnan (Treasurer, Tanzania) Gertrude Mothibe (Secretary, Lesotho), George Proctor (Botswana), Muhammad Bodhanian (South Africa); Stanley Banda (Swaziland), Chris Chitemerere (Zimbabwe)

IV. Size of Enterprise

- 1 - 5 employees/members
- 11 - 20 employees / members
- 50 -100 employees/members
- 6 -10 employees/members
- 20 - 50 employees/members
- >100 employees/members

V. Foreign Trade

Exports: Export volume in <year>: %

Country	Percentage	Products
1.	1.....	1.....
2.	2.....	2.....
3.....	3.....	3.....

Imports: Import volume in <year>: %

Country	Percentage	Products
1.	1.....	1.....
2.	2.....	2.....
3.....	3.....	3.....

VI. Your Expectations of the Association

Please indicate the importance of each of the following activities to your organization by ticking the respective boxes below (the higher the number, the more important the activity is to you, i.e. 1 = unimportant, 10 = very important).

A. Political Advocacy

1 2 3 4 5 6 7 8 9 10

B. Provision of Services

1 2 3 4 5 6 7 8 9 10

Which services/issues are of particular interest to you?

	1	2	3	4	5	6	7	8	9	10
Legal advice										
Fairs/exhibitions										
Training										
Cooperation with other enterprises										
International contacts										
Technical advice										
Administrative advice										
Other (please specify)										
Other (please specify)										

VII. Further Comments

.....

I,.....(Name).....
.....(Designation), who warrants that he is authorized to sign this document on behalf of the above-mentioned Company/Association, certify that the above information is correct and agree to accept and be bound by, and observe the Constitution and any by-laws formed there under, or codes laid down by the Association.

I understand that if any of the statements or undertakings made above are breached or found to be false this will constitute the infringement of the SAGMA Constitution and will invalidate this application for my membership, or if already elected as a member, will make my membership null and void.

Signature:

Date:

IMPORTANT NOTE:

All information contained in this application will be treated as confidential and used purely to assess the eligibility and acceptability of company/association for the membership of the SAGMA.

The SAGMA is funded by members subscription fees, paid annually during January of each year, unless arrangements have been made and agreed to in writing by the Executive Committee for other form of payment. The fees are adjusted on annual basis and agreed to at the Annual General Meeting or General Meeting.