



## MEMBERSHIP REGISTRATION REQUEST



### FORM

*Herewith, I would like to request to be a member of Bali Culinary Professionals period May 2009 – April 2010.*

FAMILY NAME: \_\_\_\_\_ FIRST NAME: \_\_\_\_\_

DATE OF BIRTH: \_\_\_\_\_ NATIONALITY: \_\_\_\_\_

COMPANY: \_\_\_\_\_ JOB TITLE: \_\_\_\_\_

COMPANY ADDRESS: \_\_\_\_\_

HOME ADDRESS IN BALI: \_\_\_\_\_

CONTACT NUMBER:

Tel : \_\_\_\_\_ Fax : \_\_\_\_\_

Mobile : \_\_\_\_\_ E-mail : \_\_\_\_\_

**Renewal of Membership:** (please tick the box)

Indonesian Culinary Professional Rp. 175.000/person/year

Expatriate Culinary Professional Rp. 650.000/person/year

Food Distributor/ Supplier Rp. 650.000/person/year

Corporate/ Supplier Rp. 1.500.000/ 3 person/year

**New Membership:** (please tick the box)

Indonesian Culinary Professional Rp. 200.000/person/year

Expatriate Culinary Professional Rp. 850.000/person/year

Food Distributor/ Supplier Rp. 850.000/person/year

Corporate/ Supplier Rp. 2.000.000/ 3 person/year

*Kindly attach your business card*

\_\_\_\_\_  
SIGNATURE

### AFFIRMATION

*Bali Culinary Professionals*

Travel Works Communications International

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Email: [korawati@indosat.net.id](mailto:korawati@indosat.net.id) or [info@travelworks-bali.com](mailto:info@travelworks-bali.com)

The undersigned, President (Committee Board) of BCP, confirm that the above candidate fulfils the conditions for Active Membership of BCP period May 2009 – April 2010.



\_\_\_\_\_  
Made Putra  
President- BCP Bali Culinary Professionals

Date: \_\_\_\_\_