



PHILIPPINE PRINTING TECHNICAL FOUNDATION, INC.

2nd Floor, Room 208, SCC Building, 4427 Interior Old Sta. Mesa Street, Sta Mesa, Manila
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Website: www.pptf.org

MEMBERSHIP APPLICATION FORM

APPLICATION REQUIREMENTS

Please submit the following:

1. Accomplished Application Form
2. Any of the following: LGU Business Permit / DTI Registration / SEC Registration

COMPANY INFORMATION

Company Name: _____ Year Established: _____

Address: _____

Tel. No.: () _____ Fax No.: () _____ Mobile No.: _____

E-mail Address: _____ Website: _____

Type of Organization: () Single Proprietorship () Partnership () Corporation
 Nature of Business: () Printer () Supplier of Consumables () Manufacturer / Distributor () Service Bureau
 Employment Workforce: Administrative: () 1-20 () 21-50 () above 50 | Production: () 1-20 () 21-50 () above 50
 Sales Force: () 1-20 () 21-50 () above 50

RELATED PRINTING PROCESSES / ACTIVITIES OF YOUR COMPANY

- | | | | |
|--|---|---|--|
| <input type="checkbox"/> Offset | <input type="checkbox"/> Social / Stationery Printing | <input type="checkbox"/> Prepress | <input type="checkbox"/> Printing Equipment Dealer |
| <input type="checkbox"/> Letterpress | <input type="checkbox"/> Labels and Packaging | <input type="checkbox"/> Finishing / Postpress | <input type="checkbox"/> Paper Dealer |
| <input type="checkbox"/> Gravure | <input type="checkbox"/> Digital Printing | <input type="checkbox"/> Paper Converting | <input type="checkbox"/> Computer to Plate (CTP) |
| <input type="checkbox"/> Flexo | <input type="checkbox"/> Print on Demand | <input type="checkbox"/> Graphic Design Services | <input type="checkbox"/> Service Bureau |
| <input type="checkbox"/> Forms / Continuous Forms | <input type="checkbox"/> Wide Format Printing | <input type="checkbox"/> Advertising | <input type="checkbox"/> Others, please specify: _____ |
| <input type="checkbox"/> General Commercial Printing | <input type="checkbox"/> Publishing | <input type="checkbox"/> Printing Supplies Dealer | |

OFFICIAL REPRESENTATIVES TO THE FOUNDATION

MEMBERSHIP RATES

COLORED
PHOTO
HERE

Official Representative

Name: _____
 Designation: _____
 E-mail: _____
 Mobile: _____

COLORED
PHOTO
HERE

Alternate Representative

Name: _____
 Designation: _____
 E-mail: _____
 Mobile: _____

Please put a check on your category:

- | | |
|---|--|
| <input type="checkbox"/> REGULAR MEMBERS
(corporations, partnerships or single proprietorships engaged in the business of printing and allied business such as graphic arts, machineries, printing supplies manufacturers and sellers, CTP and other prepress and postpress service bureaus.) | <input type="checkbox"/> ASSOCIATE MEMBERS
(individuals, advertising, public relations or design agencies, organizations, foundations and print buyers who would like to support the aims and purposes of the PPTF.) |
|---|--|

JOINING FEE	ANNUAL FEE
P2,000	P3,000

JOINING FEE	ANNUAL FEE
P2,000	P3,000

REMINDERS

1. An official billing will be sent to you through e-mail / fax after your membership has been approved. Membership fees are payable within 15 working days upon receipt of your official billing and notification of acceptance of membership through e-mail / fax. After payment is made through bank deposit, please e-mail your deposit slip to **pptf1967@gmail.com**, clearly indicating your company name and your contact informations. Failure to pay the membership fee disqualifies the applicant from membership. Kindly make all checks payable to PHILIPPINE PRINTING TECHNICAL FOUNDATION, INC.
2. Please deposit your payments to: BPI Family Bank Account No. 5575 - 0469 - 85.
3. Your membership officially starts on the date the membership fee is paid and expires one day before that same date the following year. A reminder notice will be sent to you thirty (30) days before your membership expires.

This is to confirm our intention to become a member of the PHILIPPINE PRINTING TECHNICAL FOUNDATION, INC. (PPTF) and extend our full support towards its commitment to develop excellence and growth in the Philippine Printing Industry. We pledge to abide by its bylaws and promote goodwill and camaraderie within the industry at all times.

FOR OFFICIAL USE ONLY:

Referred by: _____ Date: _____
 Requirements Submitted:
 Application Form
 Copy of LGU Business Registration / DTI Registration / SEC Registration
 Approved by: _____
 Membership No.: _____

APPLICANT'S SIGNATURE OVER PRINTED NAME | DATE SIGNED