

PART 1

(To be completed by the Applicant)

We hereby apply for registration as a corporate member of the Institute and in support thereof state as follows:

1. Name of Organisation

2. No. & Date of Certificate of Incorporation:.....

or

3a. Business Registration Number:.....
(Attach photocopy of Certificate)

b. Company Phone No:.....

E-mail:.....

4. Business Address:.....

5. Nature of Business:.....

6. Number of Staff employed:.....

7. Company's Representative:.....

(Managing Director/Chief Executive) or Representative

Name:.....

Officiating Designature:.....

Signature:.....

Date:.....

8. Declaration of Applicant

(a) We
Hereby declare that the information given on this form is correct and we agree to abide by the Rules and Regulations of the Institute if our application is successful.

(b) We enclose the following necessary documents:

i) Photocopy of the Certificate of Incorporation/
Business Registration

ii) Membership application fee of
NGN200,000.00 (non-refundable payable to
the "Institute of Safety Professionals of
Nigeria" Account with First Bank of Nigeria Plc,
Account No.: 2004129222.

iii) Screening fee of NGN25,000.00 and Annual
Dues of NGN100,000.00 (Paid first quarter of
every year).

NB: Attachments:

- (a) Safety Policy and Program of Own Company
- (b) Evidence of safety training of employees
- (c) Safety audit report of facility
- (d) Safety Performance Report
- (e) Attach completed Membership Registration checklist.

PART 2 REFEREE DECLARATION BY THE REFEREE

I, the undersigned, hereby state that the applicant is an entity having a legal existence and in my opinion a fit and proper Organisation to be admitted as a Corporate Member of the Institute.

Name: _____

Title/Rank: _____

Address: _____

Official Position: _____

Signature: _____

FOR OFFICE USE ONLY

Date Received: _____

Fees Paid: _____

Receipt No.: _____

Application Rejected or Approved: _____

Approved or Rejected by: _____

Signature: _____ Date: _____

N.B: All completed application forms should be returned to the Registrar through the above address of the Institute.

— ISPON MEMBERSHIP BENEFITS —

- * Membership Certificate
- * Quarterly mailing of Safety Professional Magazine
- * Exclusive access to the Institute's Library, advisory and related service
- * Free access to the Information Service
- * Reduced Rates for Training courses, Conferences, Consultancy, Audit, Inspections, etc.



**INSTITUTE OF SAFETY
PROFESSIONALS OF NIGERIA
(ISPON)**

Established By Institute of Safety Professionals of Nigeria Act, 2014



NATIONAL SECRETARIAT:

No. 46, Isolo Road, Beside First Royal Oil Filling Station, Egbe Town, Ikotun Lagos.

Tel: +234 703 335 8455.

Email: info@ispon.gov.ng Website: www.ispon.gov.ng

LAGOS STATE ISPON SECRETARIAT

MAN Centre, 5, Eleruwa Street, Wema Bod Estate, Off Ajao Road,

By Adeniyi Jones, Ikeja, Lagos.

Email: isponlagos@ispon.gov.ng

APPLICATION FOR REGISTRATION AS A CORPORATE MEMBER

Name: _____

Membership No.: _____



INDICATION OF
DIRECTION



NO SMOKING



GENERAL WARNING
RISK OF DANGER



SMOKING AND
NAKED FLAMES
PROHIBITED



TOXIC
HAZARD

