

FIJI ARTS COUNCIL MEMBERSHIP FORM

FIJIAN MADE LICENSE FAC MEMBERSHIP FEE STO BUSINESS LICENSE FNPF MEMBERSHIP	1. REQUIREMENTS				
FIRST NAME: MIDDLE NAME: LAST NAME: DATE OF BIRTH: FNPF #: TIN #: MARITAL STATUS: RACE: RELIGION: VILLAGE: PROVINCE: COMMUNITY: ESIDENTIAL ADDRESS: EMAIL: POSTAL ADDRESS: EMAIL: POSTAL ADDRESS: EMAIL: POSTAL ADDRESS: BIRTH CERTIFICATE #: ARE YOU A FIJI CITIZEN? YES / NO S. BUSINESS INFORMATION INDIVIDUAL GROUP GROUP: DATE OF ESTABLISHMENT (Organisation / Group): LOCATION OF THE BUSINESS: FIJIAN MADE LICENSE NO: DATE OF FIJIAN MADE LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: BUSINESS LICENSE NO: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINESS LICENSE EXPIRE: DATE OF BUSINESS LICENSE ISSUE: DATE OF BUSINE	BUSINESS LICENSE LATEST PASSPORT PHOTO (x1)	FNPF MEMBERSHIP BIRTH CERTIFICATE PHOTOS OF ART WORK			
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MRS FIRST NAME: MIDDLE NAME: LAST NAME: DATE OF BIRTH: FNPF #: TIN #:					
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4. ARTS SPECIALITY (Please Tick the box that you are speciality)	5. CRAFTS SPECIALITY (Please Tick the box that you are speciality)		
VISUAL ART MUSIC BAND SCULPTURE ART COMPOSER PHOTOGRAPHY FLORAL ART TRADITIONAL DANCE (MEKE) FASHION DESIGN CONTEMPORARY DANCE LITERARY ART OTHER	TRADITIONAL CONTEMPORARY WEAVING JEWELLERY SCREEN PRINTING TIE & DYE MASI CULINARY MAGIMAGI WEAVING SEWING OTHER		
6. EMERGENCY CONTACT			
CONTACT PERSON 1 NAME: ADDRESS: CONTACT PERSON 2 NAME: ADDRESS:	PHONE NO.:		
7. FEES EAC MEMPERSHIP EEE AMOUNT (\$)			
FAC MEMBERSHIP FEE AMOUNT (\$)			
8. DECLARATION			
I,HEREBY DECLARE THAT ALL THE INFORMATION THAT IS PROVIDED IS TRUE AND CORRECT.			
SIGNATURE:	DATE:		
9. SOME OF THE BENEFITS AS A			
- FAC ID CARDS - ONLINE MARKETING - FAC MARKET DAY / ANNUAL EXHIBITION - FAC TRAININGS	- ACCESS TO FUNDING - RENEWAL OF LICENSE - LOCAL & INTERNATIONAL EXHIBITION		
10. OFFICIAL USE ONLY			
OFFICER'S FULL NAME:	RECEIPT NO.:		
SIGNATURE:	DATE:		





VISIT US: