



MEMBERSHIP APPLICATION

Name:
First Name Surname

Email Address:.....

Telephone Number:.....

Website/Social Media Platforms:.....

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Profession:.....

Current Employer:.....

Immediate past Employer:.....

Years of Experience:.....

Indicate Areas of Interest:

- | | |
|-----------------------|-----------------------------|
| 1. Culinary Arts | 5. Culinary Excursions |
| 2. Pastry Arts | 6. Wine & Beverage |
| 3. Hotels/Restaurants | 7. Agriculture/Food Produce |
| 4. Culinary Education | 8. Hospitality Consulting |
| | 9. Seminars & Trainings |
| | 10. Kitchen Design |

Indicate Type of Membership (Number of years in the Industry)

Associate: 0–5years N10,000

Full Member: 6 Years & Above N20,000

Signature:.....