EMPLOYERS' FEDERATION OF PAKISTAN



Form 'A'

FORM OF APPLICATION FOR MEMBERSHIP EMPLOYERS' FEDERATION OF PAKISTAN

Name of Organization:					
Full Address (Head Offic	ce):				
Telephone No: Email:			Fax:		
			Website:		
Type of Organization:					
□ Multinational □ Public Sector			rivate Sector	Ownership	
Proprietorship Incorporated at:	□ Partnership		td Company	□ Trade/Employers Body	
Number of Branches:					
Head of Organization: _					
Name of Director/Partne				et if necessary)	
1.		6.			
2.		7.			
3.		8.			
4.		9.			
5.		10.			
	, , .				
Name of Voting Represe		nooimon	Signatura		
	ນ	pecilien,			
FOR ORDINARY ME	MBER:				
Total No of employees o	f the organization as or	n			
		D	ate	No. of Employees	
FOR TRADE & EMPI	LOYERS BODIES:				
Total No of members of	the organization as on				
		D	ate	No. of Members	

We agree to abide by the decision of the EFP in respect of the application.

Signature:	
Name:	
Designation:	
Stamp:	

EMPLOYERS' FEDERATION OF PAKISTAN The Employers' Advocate

Contact details of relevant representatives in different departments: (*In case of any new update in future, please send us the updated form for better communication.*)

S.NO.	POSITIONS	NAME (WITH OFFICIAL DESIGNATION)	CELL NO.	EMAIL
1.	Managing Director/CEO			
2.	Voting Representative			
3.	Corporate/CSR Head			
4.	Finance			
5.	HR/IR Head			
6.	OSH Head			

Effective from 1st July, 2022 MEMBERSHIP SUBSCRIPTION

- One Time Membership Fee Rs. 5,000/-
- Annual Subscription payable on the basis of Fiscal Year July-June

ENTERPRISE MEMBERS: (Membership Fees applicable s per following table.)

Number of Empløees	Amount of Annual Subscription		
Up to 20	7,473		
20 to 50	8,967		
50 to 100	11,549		
101 to 200	14,266		
201 to 300	16,303		
301 to 400	19,701		
401 to 500	23,098		
501 to 600	27,174		
601 to 700	29,891		
701 to 1100	32,880		
1101 & Above	50,951		