MEMBERSHIP APPLICATION

Types of Membership

Membership in the US-Turkmenistan Business Council is divided into two tiers, Board Membership and General Membership. All membership applications must be approved by the Board of Directors.

Board Membership includes:
- Board membership with organizational voting rights
- Ability to lead and direct the Council
- Invitations to private events
- Placement of the company logo on the Council website
- Priority for sponsorships and seating
- Invitation to and participation in all Council events

General Membership includes:
- Placement of the company name on the Council website
- Second tier priority for seating and sponsorships
- Invitation to and participation in most Council events

MEMBERSHIP TIER (SELECT ONE):

☐ Board Membership ($6,500 annual dues)
☐ General Membership ($3,000 annual dues)

APPLICANT INFORMATION:

Company Name: ________________________________________________________________

Website: _______________________________ Business Area: __________________________

Company Description: ________________________________

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Revised August 2020
The Council aims to advance the business interests of U.S. companies in Turkmenistan. To determine eligibility, please check all that apply:

☐ The company was formed and/or incorporated in the U.S.
☐ The company has substantial operations and facilities in the U.S.
☐ The company employs substantial numbers of U.S. citizens
☐ The company is headquartered in the U.S.
☐ Shares of the company are traded on a U.S. stock exchange or over-the-counter market.
☐ The company pays U.S. state and federal taxes.
☐ The company is not controlled or owned by foreign companies or persons.

Company Headquarters Address:
_____________________________________________________________________________________
_____________________________________________________________________________________
City: _____________________________________   State: _________   Zip Code: ___________________

Primary Contact
Name: ________________________________ Title:  __________________________________
Address: ___________________________________________________________________________
City: ______________________________________    State: __________     Zip Code: __________
Phone:  ______________________________________    Mobile: _____________________________
Email: ___________________________________________________________________________

Billing Contact (if different than above)
Name: ________________________________ Title:  __________________________________
Address: ___________________________________________________________________________
City: ______________________________________    State: __________     Zip Code: __________
Phone:  ______________________________________    Mobile: _____________________________
Email: ___________________________________________________________________________

Secondary Contact
Name: ________________________________ Title:  __________________________________
Address: ___________________________________________________________________________
City: ______________________________________    State: __________     Zip Code: __________
Phone:  ______________________________________    Mobile: _____________________________
Email: ___________________________________________________________________________

Please email completed form to: Nicholas Roda – nroda@wms-jen.com