



ASSOCIATION OF ENTERPRISE RISK MANAGEMENT PROFESSIONALS

OFFICE NO 11,GROUND FLOOR KINGSWAY BUILDING, NEAR CASH AND CARRY , 51-52 MARINA, LAGOS.

07046226901, 07088905252, 01-2911182.

[info@aermp.org](mailto:info@aermp.org), [www.aermp.org](http://www.aermp.org)

## **CORPORATE MEMBERSHIP APPLICATION FORM**

1. COMPANY / INSTITUTION NAME: .....
2. TYPE OF BUSINESS: .....
3. COMPANY ADDRESS: .....
4. CONTACT TELEPHONE: .....
5. COMPANY EMAIL ADDRESS: .....
6. APPLICABLE FEE: .....

### **COMPANY REPRESENTATIVE:**

NAME: .....

POSITION: .....

TELEPHONE: .....

EMAIL: .....

### **WE DECLARE THAT**

- (a) The above information is correct
- (b) We will endeavor to further the objectives of the Association of Enterprise Risk Management Professionals
- (c) We will abide by the rules and regulations of the association (AERMP)
- (d) We will accept responsibility for any error, wrong information or omission contained in this form.

SIGNATURE/DATE: .....