



Making Kenya's Hospitality globally competitive
KENYA ASSOCIATION OF HOTEL KEEPERS & CATERERS

Heidelberg House, 2nd Level, Mombasa Road, P.O. Box 9977 – 00100, Nairobi
Tel: 254-020-604419/602538, Fax: 254-020-602539, E-mail:info@kahc.co.ke

KAHC/APP/FORM/ORD/001

ORDINARY MEMBERSHIP APPLICATION FORM¹

IMPORTANT

- *This application form is only applicable to Ordinary membership category as per the Memorandum and Articles of Association*
- *The application to be filled in triplicate, one copy to be retained by the applicant and the others to be submitted to KAHC.*
- *When returning completed application form, please enclose a cheque in settlement of entrance fee.*
- *Make sure that two KAHC members who propose and second your application append their signatures.*
- *Attach a copy of the Company's / Business Certificate of Incorporation*
- *For the Turnover, please quote the audited accounts of the last financial year where possible.*
- *Please note that membership may be terminated if the business engages in any proscribed trade by the laws of the land.*
- *Please note that KAHC may call for verification or proof of any information furnished herein.*
- *Please note that the information you provide in this form will be treated as confidential.*

ORDINARY MEMBERSHIP APPLICATION FORM¹

SECTION I

Company/ Business Name :.....
Postal Addresses:.....
Postal Code:.....
Physical Addresses:.....
Nearest town.....
Telephone Nos.:.....
Fax Nos.:.....
E-mail Addresses:.....
Web Site:

SECTION II

1.Nature of Business:.....

2. Physical Location:.....
.....

3. When was the business established:.....

4. Type of Ownership: (a) Company (Legal status)
(b) Sole proprietorship
(c) Partnership

5. Full names and Nationality of the company Directors/Partner/ Sole proprietor as at the date of this application

	Full Name	Nationality	ID/Passport No.	Address
1				
2				
3				
4				
5				
6				

ORDINARY MEMBERSHIP APPLICATION FORM¹

6. Names and contacts of the Senior Managers

Designation	Name	E-mail	Phone
General Manager			
Financial Controller			
Operations Manager			
Sales/Marketing Manager			
Resident Manager			

7. Total capital invested:.....
 (a) Share capital:.....
 (b) Loan capital:.....

8. Is your business Star- rated? If yes state its star rate.....

9. Patron capacity.....

10. Bed capacity (if applicable)

11. Approximate annual turnover Kshs.....

12. Number of Employees

(i) Management employees

(ii) Unionisable employees

(a) Permanent :.....

(b) Casual:.....

Total.....

13. Structure of Annual Membership Fee Its provided in the attachments.

14. Does your business have all the requisite statutory licenses. If yes give details.

License	Date of Issue	Validity Period

15. Does the business meet all the requirements of Public Health Act (Cap.242 of Laws of Kenya)

¹ Attached: Memorandum and Articles of Association of the Company, Executive Brief, Subscription Criteria, Voting Rights and Code of Ethics.

ORDINARY MEMBERSHIP APPLICATION FORM¹

16. Are all your hospitality staff medically fit to serve as such.....
If no give details

SECTION III

17. Proposer: **(must be a member)**

Name:.....

Signature:.....

Date:.....

=====
(Official stamp)

18. Seconder: **(must be a member)**

Name:.....

Signature:.....

Date:.....

=====
(Official stamp)

	Item	Please Tick
1	Sections I & II of form completed	
2	Form signed and stamped by Proposer and Seconder (Section III)	
3	Appropriate cheque for entrance fees attached	
4	Copy of certificate of incorporation attached	

¹ Attached: Memorandum and Articles of Association of the Company, Executive Brief, Subscription Criteria, Voting Rights and Code of Ethics.

ORDINARY MEMBERSHIP APPLICATION FORM¹

DECLARATION

I hereby declare that the information given above is complete and correct.

Full name:.....

Designation:.....

Signature:.....Date:.....

For and on behalf of our company/business I am applying for membership of Kenya Association of Hotelkeepers and Caterers (KAHC) and agree to be bound by its memorandum and articles of association and any rules thereunder which are now or may at any time be in force; to notify Kenya Association of Hotel Keepers and Caterers of any changes in Directors/Partners/Management or ownership during the period of our membership to the Association and also to notify the association of any other changes on any information given in the application form including turnover.

FOR OFFICIAL USE ONLY

Approved by the KAHC Board of Directors.

.....
.....

Date

Signature.....

Not Approved by the KAHC Board of Directors

.....
.....

Date.....

Signature.....

¹ Attached: Memorandum and Articles of Association of the Company, Executive Brief, Subscription Criteria, Voting Rights and Code of Ethics.