



LabourMan
Consultants

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Personal Particulars

Surname: _____
Full Names: _____
ID Number: _____
Cell Number: _____

Business Particulars

Business Name: _____ (hereinafter referred to as "Member")
No. of Employees: _____
Physical Address: _____
Postal Code: _____
Work Telephone: _____ Work Facsimile: _____
Email Address: _____
VAT Number: _____

Signature: _____ Dated: _____

A Division of
Comco
Group of Companies

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