



CAC/IT/NO.12293

HATMAN[®]

HOSPITALITY AND TOURISM MANAGEMENT
ASSOCIATION OF NIGERIA

website: www.hatman2010.org

Application For Membership

Please read these notes before completing form.

HATMAN welcomes application for membership form suitably qualified professionals as members or fellows, and from others who wish to be associate with the aims and objectives of the Association as Associate, and particularly from young people at the start of their careers or considering a career in Hospitality and Tourism Industry.

This form is for admission to all categories of membership as may be decided by the Membership Committee.

2460

Affix Three

Passport size

Official Use Only

File No.

Confidential

Note: In accordance with the regulation made under HATMAN's constitution, applications for membership must be accompanied by a form fee of N2000 before processing. Application form may also be obtained from HATMAN's website: www.hatman2010.org complete and sent to the National Headquarter of the association for processing. Application form downloaded from website also attract the application fee of N2000. All fees are payable to HATMAN at UBA Acc/No. 1010807502.

SUBSCRIPTION RATE PER ANNUM

- | | | |
|-----------------|---|---|
| a - Fellow | - | N |
| b - Full Member | - | N |
| c - Associate | - | N |
| d - Affiliate | - | N |

1. Full Name: (Mr/Mrs/Miss/Dr)
(Underline Surname)

2. Date of Birth

3. Age:

4. Nationality

5. Private Address

6. Business Name and Address

Telephone

Telephone

7. I wish correspondence to be addressed to

Private Address

☐

Business Address

☐

8. Nature of Business

9. If your company is part of a chain group
Please state Name and Location

Do you belong to any International Professional body ? Yes ☐ No ☐ if yes

which, professional body ?.....

GradeMembership.....

Date of Registration.....

14. Any additional information should be attached to this form

15. **Reference:** please give the names and addresses of two **HATMAN** members, (not relatives) who will act as you referees. The first referee should be in a position to support your application by actual knowledge of your responsibilities. If you are head of your company, please name two business professional association. One of the referees should preferable be a statutory member of HATMAN (Fellow or Member). Referees will be approached at the discretion of the Membership Committee

1st Referee	1st Referee
Name	Name
Address	Address
Tel:	Tel:

The first referee should sign this statement whenever possible but second referee may sign if the former is not available.

I support this application for membership of the Hospitality and Tourism Management Association of Nigeria

Signature..... Membership Grade and Number.....

16. **Method of payment:** pay in cash, cheque or Bank transfer to HATMAN at UBA ACC. No. 1010807502 complete the appropriate section and return the entire form to:

Executive National Secretary

HOSPITALITY AND TOURISM MANAGEMENT ASSOCIATION OF NIGERIA.

Floor 5, Suite 99 Turaki Ali House (NNDC)

**3 Kanta Road,
Kaduna.**

I enclose a cheque/Draft for N..... Made payable to HATMAN

17. **Declaration by Application:** I declare that the statements made herein are correct to the best of my knowledge and belief that if admitted to membership, I agree to be governed by the rules and regulations of the HATMAN as they exist and they may here after be altered.

Signature of Applicant:..... Date:.....

OFFICIAL USE ONLY

Membership Grade.....

Debit Note No. Date.....

Subscription fee.....

Registration fee.....

Form fee.....

Others.....

Total=.....

Official Signature.....

E-mail: nationalsec@hatman2010.org

Tel:08161883944,08035991712,08029488666,07055629535,08096569494,08056220909