

FANAFI/EFMC SPLENDORA PROJECT

Partner Enrollment form

Recent Passport

Category (Tick as appropriate):

Investor-Entrepreneur (Investor-distributors)

Direct Distributor (Independent sales agent)

Names (Surname).....

(Middle Name).....

(First name).....

(Title).....

Current Address

(Street Address):.....

.....

.....

City/State:.....

Country:.....

Phone Numbers (with National Code):

.....

E-Mail Address:

.....

Postal Address (if available):

.....

Complete and return to Dr Obinna Oleribe @ obinna.oleribe@expertmanagers.org or Plot 5E Excellence & Friends Street, Cadastral Zone, Dutse, Abuja FCT Nigeria. P.O. Box 8179 Wuse Abuja Nigeria

For Investor Entrepreneurs only:

Level of Investment:

90,000

91,000 – 270,000

271,000 – 450,000

451,001 – 900,000

901,000 – 1,080,000

Above 1,080,000

Locality of Interest (State or City):.....

Current

Profession:.....

Number of Independent Sales Agents to be employed:.....

When will you be ready to Start:

February 2014

March 2014

April 2014

July 2014

Others (*Please Specify*).....

Project improvement ideas (if any)

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Any other Comments

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.....

Signature

Date