0917-441-9596 | 0951-068-1934 (082) 222-1402 www.davaochamber.com info@davaochamber.com

MEMBERSHIP UPDATE FORM FOR 2024

Member's Information for Publishing (Database for Dissemination and posted in DCCCII Website)
Company Name:
Membership Type:
Address (for publishing):
Central Cellphone/Telephone:
Central Fax:
Central E-Mail:
Web page:
Short Company Profile (Max. of 200 words):
**Note: Please send us your high-resolution logo and picture of your company and products.
I/We authorized Davao City Chamber of Commerce and Industry Inc. to utilize the information stated above for the DCCCII Website, Directory of Members & Information Dissemination.
Authorized by:
Signature over printed name

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MEMBERSHIP UPDATE FORM FOR 2024

Membership Classification (Database for Dissemination and posted in DCCCII Website); *Kindly check the choices below that is applicable to you*

For regular members only:			
Regular Corporate Regular Individual Regular Associate Regular Affiliate			
Based on your company's Annual Net Income on the Audited Financial Statement (AFS)			
Micro Enterprise (3M and less) Small Enterprise (Less than 10M)			
Medium Enterprise (10.1M-100M) Large Enterprise (100.1M+)			
For special members only:			
Special Corporate Special Individual Special Associate Special Affiliate			
Based on your company's Annual Net Incom on the Audited Financial Statement (AFS)			
Micro Enterprise (3M and less) Small Enterprise (Less than 10M)			
Medium Enterprise (10.1M-100M) Large Enterprise (100.1M+)			
Representatives (Please advise if it will be the Official or Alternate Representative)			
Representative's Name will be published as the contact person of the company in DCCCII's Membership Directory and will be part of the Official Mailing List of DCCCII for all communications. E-mail addresses and direct phone numbers are only for internal use of DCCCII.			
Official Representative's Information			
Full Name:			
Designation:			
Direct Email Address:			
Direct Phone Number:			



Alternative Penrocentative's Information

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Accordance Representative 5 Information	
Full Name:	
Designation:	
Direct Email Address:	
Direct Phone Number:	
Companies Tin #:	
Note: If you are to change the respective please submit a formal letter stating the ne	
DISCLAIMER	
By signing below, we hereby authorize DCCCII or its emposaid information and shall hold DCCCII, its Officers, and thereto. We understand that any misrepresentation in ouground for the disapproval of our application for members	Board of Trustees free from any liability in relation r Application is our responsibility and is sufficient
Date:	
Official Representative Name:	Signature:
Alternative Representative Name:	Signature:

DATA PRIVACY

By signing this consent form, I/we (as "Data Subject") grant my/our free, voluntary and unconditional consent to the collection and processing of all Personal/Company Data, and records (collectively, the "Information") relating to our company disclosed/transmitted by me/us in person or by my/our authorized representative/s to the information database system of the Davao City Chamber of Commerce & Industry, Inc. and/or any of its authorized personnel/s or representative/s as Information controller, by whatever means in accordance with Republic Act (R.A.) 10173, otherwise known as the "Data Privacy Act of 2012" of the Republic of the Philippines, including its Implementing Rules and Regulations (IRR) as well as all other guidelines and issuances by the National Privacy Commission (NPC).

I/we acknowledge, further, that if I/we was/were to exercise any of the Rights of the Republic Act (R.A.) 10173, DCCCII reserves its right to re-evaluate and/or terminate its Business with me/us as well as any of

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MEMBERSHIP UPDATE FORM FOR 2024

the Purposes and/or DCCCII services/products for which the Information and/or Personal Data has been collected and processed.

I/We have read and understood the above and hereby consent to, agree on, accept and acknowledge these terms of consent for myself/ourselves and/or as agent/s for and on behalf of the principal/s I/we represent by signing below

Signed in Davao City on, 202_		
☐ AGREE	DISAGREE	
Authorized Signature by:		
Name:		
Signature over	printed name:	