APPLICATION FOR NPCK MEMBERSHIP PARTICULARS OF THE APPLICANT MAF/18

Company N	Name:		
Name of Dir	ectors or		
Partners (if	[:] any)		
Postal Add	ress		
Physical A	ddress:		
Telephone	Number		
E-mail Add	Numberlress:		
	rtion (%) of your business is devoted to Potato?		
	ch actor/category do you belong in the value chain		
	Actor/Category	Tick Where appropriate	
	Traders and traders associations		
	Farmer, Farmer groups and Associations		
	Seed Potato producers/multipliers	1 7	
	Processors		
	Research Partners and Academia	1-2-2	
	Government and Regulatory bodies	1	
	Input providers		
	Financial and Insurance Institutions		
	Affiliated Partner	0	
	Agricultural Technologies and Innovations		
What key a	areas would you like the NPCK to address in your	business?	
Name of yo	our Representative to NPCK:		
Designation	n:		
Signed:		Date:	
FOR OFFIC	CIAL USE ONLY:		
Approved/Not approved		Date	
Category o	f Membership approved		
Signed: CE	O		
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All correspondence to: The Executive Officer, PO Box 29982-00100 Nairobi;

Tel: +254 712338633 /+254 799739578 Email: npck@npck.org