



ZAMBIA RED CROSS SOCIETY SUPPLIER APPLICATION FORM

Business Registered Name :

Country of Registration & Registration No :

Legal Entity/Business Type:

Registered Office & Location:

Tax Registration No:

Contact Person:
Contact Details :

Company Directors Addresses. (Shareholders & % holding)

CATEGORY: Items Description:

Bank Details:

Estimated Annual Turnover :

Name
(Print).....
.....

Signed:
.....

Dated: