



CBA NIGERIA

CHRISTIAN BOOKSELLERS ASSOCIATION (CBA) NIGERIA
CHAPTER OF CHRISTIAN TRADE ASSOCIATION INTERNATIONAL
APPLICATION FORM

1. Name of Bookstore _____

Street Address _____

Nearest Bus Stop _____ Postal Address _____

2. Business Registration No _____ No of Employees _____

Owner of Business _____ Manager of Business _____

Email _____ Phone _____ Fax _____

3. Are You Born Again? Yes No

If yes, when? _____ Where _____

Which church do you attend? _____

Address _____

Name of Pastor _____

Address _____

What is your status in the Church? _____

What is your marital status: Single Married Widow/Widower Separated

Christian Booksellers Association Nigeria

Doxology House

24/26, Sadiku Street, Ilasamaja, Mushin - Lagos.

Tel: 08033914873, 07028818711, 08023275769

E-mail: cbanigeria@yahoo.com

4. **REFERENCES**

(a) **TRADE REFERENCES:** (The referee must be a CBAN member)

Name _____

Address _____

Signature _____ Date _____

(b) **CHURCH REFERENCE:** (The referee must be the pastor, leader or spiritual Head of your church who knows you)

Name _____

Address _____

Signature _____ Date _____

5. I agree to follow the CBA Code of Ethics, to be bound thereby in all our dealings with others and further agree not to violate any Nigeria Trade Laws

Applicant's Name

Applicant's Signature

Date

6. Two postcard size photographs each of inside and outside bookstore and Owner's two passport photographs must be attached to this Application Form.

7. Fill and Return to Christian Booksellers Association Nigeria (CBAN)

National Secretariat,

Address: 21, Awolowo Road, Suite B64, Ikeja, Lagos

Tel: 08033914873, 07028818711.

Email: cbanigeria@yahoo.com

FOR OFFICIAL USE ONLY

8. Regional Chairman's Recommendation _____

Name

Signature