

CHARTERED INSTITUTE OF TAXATION, GHANA
P.O.BOX OS.1558, OSU ACCRA, P.O.BOX LG 1253, LEGON-ACCRA GHANA
TEL. (0303-93 48 46), Email: taxinstitute@taxghana.org
FORM OF APPLICATION FOR MEMBERSHIP

1. Name (In Full)
(IN BLOCK LETTERS)

2. Address:
(a) Business:.....

.....

Telephone:.....

(b) Residence

Telephone:

Email Address:.....

3. Date of Birth:..... (4) Male/Female.....

5. Nationality:.....

6. Qualification: (s) (if any) and date (s) obtained (in words)
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7. Details of Applicant's Practice:
(i) State place of Practice, date and full business addresses

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(ii) Are you present in full-time practice? If so, under what name and where?
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OR (iii) If employed, name and address of Employer and position held.

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8. Are you a sole Practitioner or in Partnership: -.....
If in Partnership, state name (s) and qualification (s) or Partner (s)

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9. Ghana Card No.:.....

10. Names and Addresses of two Referees all of whom should be paid-up members of the Institute and each should attach a signed recommendation letter.

(1) Name:.....Membership/No.....

Place of Work.....

Position.....

Postal Address.....

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E-mail Address:.....

Tel:

Ghana Card No.

Signature..... Date:.....

(2) Name:.....Membership/No.....

Place of Work.....

Position.....

Postal Address.....

.....

E-mail Address:.....

Tel:

Ghana Card No.

Signature..... Date:.....

NB: *Complete Admission Forms should be forwarded to*

The Registrar
Chartered Institute of Taxation, Ghana
Rev. J. J. Mantey Block, UPSA Campus, Accra
P. O. Box OS. 1558
Osu-Accra

Together with the following: -

1. Photostat copies of your certificates (s)
2. Original (s) of your certificate (s) for verification. This/these will be returned to you under registered over.
3. Your two recent passport photographs of not more than six-month old with your name written at the back.
4. Evidence of Payment (*Pay-In-Slip*) to the following bank details in the name of *Chartered Institute of Taxation, Ghana*:
 - a. *Ecobank Ghana Head Office Branch, Account No. 1441001393034 and or*
 - b. *Standard Chartered Bank, Liberia Road Branch, Account No. 0100113743400*
 - c. *CITG Online Payment Platform: <http://merchant.paywithonline.com/?mc=citg>*

I hereby agree, on admission as a member, to be bound by the terms of the byelaws in Force.

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Date

.....
Signature of Applicant

FEES:
Membership Application fee: GHS300.00
Induction fee: GHS3,780.00

FOR OFFICE USE ONLY

