



WEST AFRICAN INSURANCE COMPANIES ASSOCIATION

MEMBERSHIP APPLICATION FORM

- 1. Name of Company:
2. Head Office Address:.....
3. Name of CEO:
4. Tel:
5. E-mail:

6. Type of company

- Life only, Non-Life only, Composite, Actuary, Loss or Claims Adjuster, Broking, Reinsurer, Other

7. Membership Category

- Ordinary (For institutions with headquarters registered in a WAICA country)
Associate (For institutions with headquarters registered outside WAICA)
Intermediaries: (For institutions with headquarters registered in a WAICA country)

Authorised Signature.....Position.....

Name.....Date.....

Please return the completed application form electronically to:

The Secretary General
WAICA Secretariat
National Insurance Commission Building
No. 337 Independence Ave, Accra, Ghana
E-mail: d.iyasere@waica.net or info@waica.net

WAICA BANK DETAILS (Foreign - USD)

Account Name:	West African Insurance Companies Association
Account Number:	2441001140913
Swift Code:	ECOCGHAC
Name of Bank:	Ecobank Ghana
Bank Branch:	Head Office
Address:	19 Seventh Avenue, Ridge West P.O. Box AN 16746 Accra- North Ghana