



**Concierge Association of Viet Nam**  
(AFFILIATED TO LES CLEFS D'OR SINGAPORE)  
"SERVICE THROUGH FRIENDSHIP"

**MEMBERSHIP APPLICATION FORM**

**ASSOCIATE MEMBERSHIP**

Please attach  
a recent  
colour  
photograph  
here

Applicant's Name: \_\_\_\_\_

ID Number: \_\_\_\_\_

Residential Address: \_\_\_\_\_

Country: \_\_\_\_\_

Contact Numbers: Home: \_\_\_\_\_ Office: \_\_\_\_\_

(Please include country and city code) Fax: \_\_\_\_\_ Mobile: \_\_\_\_\_

Email: \_\_\_\_\_

Name of Company: \_\_\_\_\_

Company Address: \_\_\_\_\_

Country: \_\_\_\_\_

Nature of Business: \_\_\_\_\_

Note: Kindly attach Company Profile together with this application.

I/We hereby undertake to abide by the Constitution of CAV and promise to uphold the image and integrity of CAV, I also undertake not to discredit CAV and / or its members and the Executive Committee at any time.

**Applicant must be proposed and seconded by the EXCOM members of Concierge Association of Viet Nam (CAV).**

_____ Proposed By	_____ Hotel	_____ Signature
_____ Seconded By	_____ Hotel	_____ Signature
_____ Applicant’s Signature	_____ Company	_____ Date

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For Official Use:

Application APPROVED / NOT APPROVED at the Executive Committee Meeting held on:

Date of Meeting: \_\_\_\_\_

Comments:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

_____ Country Representative	_____ Date
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**S E R V I C E                     T H R O U G H                     F R I E N D S H I P**  
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