

APPLICATION FOR MEMBERSHIP IN SERVICE SECTOR EMPLOYERS (PALTA ry)*** required field**

The Company is applying for a membership in PALTA ry starting from (date)

*Name of the Company

*Business ID

*Year of Establishment

* Ownership of the company (shareholders and their shares, owners)

* Primary Business Activity

* CEO of the Company

* E-mail address of the CEO

Revenue of preceding year

* Total number of personnel

* Number of employees (FI: työntekijät)

* Number of salaried and senior salaried employees (FI: toimihenkilöt ja ylemmät toimihenkilöt)

* Total sum of salaries paid preceding year, or the salary budget for present year (not including the salaries of the CEO, and of members of the Board of Directors)

* Contact person

*Position in the company

* Address

* Postal code and city

* E-invoicing address (or the billing address if the company does not have an e-invoicing address)

* E-invoice operator

* Phone number

* E-mail address

Web site

Additional information (e.g. collective agreements currently applicable in the company, membership in other Confederation of Finnish Industries EK's member association)

Date

Signature

The application is sent to info@palta.fi. Associations must also attach their rules to the application.