



### **BDS BENEFICIARY/MEMBER REGISTRATION FORM**

This registration is subject to compliance with the LTGS Official Order N° LTGS/CEO/BDS03-001A2024 as issued on 18<sup>th</sup> July 2024. The member agrees to adhere to the operational, financial, and ethical obligations outlined in the official order.

## **SECTION 1: BUSINESS LEGAL DETAILS**

Business Legal Name:	
Business Registration Number: _	
Type of Business:	☐ Sole Proprietor
	☐ Limited Company
	☐ Cooperative
	☐ Individual
	☐ Federation
	☐ Subsidiary
	Other (Specify):
Business Head Office Address:	Country:
	Province/State:
	District/City:
	Other Address:
Business Contact Information:	Phone Number:
	Email Address:
	Website (if applicable):
Business Category	☐ Private
	☐ Public







info@ltgs.rw
www.ltgs.rw

# **SECTION 2: REPRESENTATIVE DETAILS**

Full Names:	Frist Name	Last	Name
National ID Number/			
Passport ID Number:			
Gender:	☐ Male	☐ Female	
Position in Business:			Abb:
Phone Number:		Other	
Email Address:			
Physical Address:	🗘 Nationality:		
	🗘 Province/State:		
	District/City:		
	🗘 Other Address:		
Industry Sector:  Main Products/Services:	OPERATIONAL DETAIL	<b>S</b>	
Business Start Date:	//	_	
Business Size:	☐ Small	☐ Medium	☐ Large
Number of Employees	O <sub>0-5</sub>	<b>2</b> 5-50	<b>1</b> 00-150
	□ 5-10	□ 50-75	□ 100-200
	☐ 10-25	75-100	☐ 200 - Above
Annual Revenue (Estimat	200,000 RWF – 200 200,000 RWF – 50 500,000 RWF – 1,0	0,000 RWF	1,000,000 RWF – 5,000,000 RWF 5,000,000 RWF – 10,000,000 RWF 10,000,000 RWF - Above













## **SECTION 4: MEMBERSHIP DETAILS**

Membership
Category
(Choose One):

SELECT	MEMBERSHIP	MEMBERSHIP	PAYMENT
HERE	CATEGORY NAME	FEES	PERIOD
0	B-Ideation	1,800 RWF	Monthly
	B-Startup	5,800 RWF	Qualitery
0	B-Developer	35,000 RWF	Annually
	E-Company	59,000 RWF	Annually
	E- Industry	83,000 RWF	Annually
	E-Entity	100,000 RWF	Annually

#### **SECTION 5: SIGNATORY & CONSENT**

- 1. I confirm that the information provided is accurate to the best of my knowledge.
- 2. I agree to comply with the regulations and policies of the LTGS BDS Program.
- 3. I authorize LTGS Rwanda Plc to verify the submitted information where necessary.

APPLICANT'S FULL NAMES	ISSUED DATE	SIGNATURE

#### **FOR OFFICIAL USE ONLY**

RECEIVED BY	POSITION	RECEIVED DATE	SIGNATURE
		/	