

**2019 STANDARD SYNDICATE RESEARCH MEMBERSHIP FEES**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
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| **STANDARD SYNDICATE MEMBERSHIP**  The research focus of the Bureau of Market Research (BMR) is centred on the activities of the following four research divisions:   * Behavioural and Communication Research * Demographic Research * Economic Research * Household Wealth Research   To join the BMR as a standard syndicate member, the following syndicate options are available:   |  |  |  | | --- | --- | --- | | **Number of Divisions Sponsored** | **Price per annum**  **(Excluding VAT)** | **Number of reports**  **per annum** | | One division | R26 000-00 | 1 | | Two divisions | R35 000-00 | 2 | | Three divisions | R42 000-00 | 3 | | Four divisions | R46 000-00 | 4 |   Membership prices are revised annually in line with inflation expectations. Members apply for a three-year period, after which they can decide to renew or terminate membership.  Standard members qualify to purchase any research report in a division not sponsored at a discount price of R15 000-00 (VAT excluded).  *BMR research reports are published only in electronic (Pdf) format*. |

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Senior Research Coordinator

Bureau of Market Research (BMR)

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**BMR STANDARD SYNDICATE RESEARCH MEMBERSHIP APPLICATION FORM**

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(Name of entity)

hereby applies for membership of the

BUREAU OF MARKET RESEARCH

University of South Africa

From **2019** to **2021**

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**STANDARD SYNDICATE RESEARCH MEMBERSHIP**

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Use the PRICE tariffs to compute the total annual membership fee.

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| --- | --- | --- |
| **Product options** | **Tariff (R)** | **Membership fee** |
| **STANDARD SYNDICATE MEMBERSHIP** |  |  |
| One research division\* | R26 000-00 |  |
| Two research divisions\* | R35 000-00 |  |
| Three research divisions\* | R42 000-00 |  |
| Four research divisions\* | R46 000-00 |  |
| **TOTAL (excluding VAT)** |  |  |
| **Value Added Tax (15 %)** |  |  |
| **TOTAL (including VAT)** |  |  |

\*Please indicate the research divisions that will be supported (tick one or more):

|  |  |  |  |
| --- | --- | --- | --- |
| Household Wealth Research Division (01) |  | Economic Research Division (03) |  |
| Behavioural and Communication Research Division (02) |  | Demographic Research Division (04) |  |

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**STANDARD SYNDICATE RESEARCH MEMBER DETAILS**

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Type of business: .....................................................................................

Postal address: .....................................................................................

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Postal code ..................

Office address: .....................................................................................

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Telephone: ………...........................................

Fax: …..…............................................

E-mail address: ………………………………..……………….

Company VAT number: …………………...………….……………….

Please indicate the name, designation and contact details of the company representatives:

|  |  |
| --- | --- |
| **Research divisions** | **Member representative** |
| Behavioural and Communication Research | Name: |
| Designation: |
| Telephone contact number: |
| E-mail address: |
| Demographic Research | Name: |
| Designation: |
| Telephone contact number: |
| E-mail address: |
| Economic Research | Name: |
| Designation: |
| Telephone contact number: |
| E-mail address: |
| Household Wealth Research | Name: |
| Designation: |
| Telephone contact number: |
| E-mail address: |

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**PAYMENT DETAILS**

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Accounts to be sent to:

(Name and designation) .......................................................................................................

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**The BMR reserves the right to annually adjust the membership fees in line with inflation expectations.**

**On acceptance by the BMR, this form serves as a contract of membership.**

**After the initial three-year period, membership will be renewed annually. Notice of cancellation of membership must be given in writing at least one calender month before the renewal date.**

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SIGNED AT\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ THIS \_\_\_\_\_\_\_\_\_\_\_DAY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ 20\_\_\_\_\_

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**SIGNATURE DESIGNATION**

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**Please submit application form to** [**goetzm@unisa.ac.za**](mailto:goetzm@unisa.ac.za)