



Uganda
Drilling
Contractors
Association

P.O Box 6438
Kampala, Uganda

MEMBERSHIP REGISTRATION INFORMATION FORM

A THE APPLICANT

A1 Name of the drilling company:

A2 Postal Address (Location) of the
Company:

A3 Contacts:

Email address:	Telephone:	Fax:
.....

A4a Name and contacts of Managing Director:

Name and Title	Telephone:	Email
.....

A4b Name and contacts of Authorized Representative

Name	Telephone:	Email
.....

A5 Year of registration of the company:

A6 Other works done by the company apart from drilling:
.....
.....

B COMPANY OWNERSHIP AND MANAGEMENT

B1 Number of Shareholders: Total number of shares:

B2 Names, nationality of shareholders and Percentage of shares amongst shareholders:

s/n	Name of shareholder	Nationality	% of shares
1			
2			
3			

C COMPANY ASSETS

C1 Number of drilling rigs and compressors:

Number of drilling rigs:	Number of compressors:

C2 Other drilling related equipment owned by the company:

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D FINANCIAL STATUS OF THE COMPANY

D1 Annual turnover for the three (3) previous years

Year	2017	2018	2019
Annual Turnover (UGX)

E COMPANY OPERATIONS

E1 Total number of boreholes drilled for the last three (3) years:

Year	2017	2018	2019
Number of BHs			

E2 List of other works done by the company in the last three (3) years:

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Declaration

I the undersigned hereby apply for membership and declare that the information given in this application is correct to the best of my knowledge and belief;

Date:

Signature:

.....

In capacity of:

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