Myanmar Restaurant Association (MRA)

Membership Application Form

2 photo

1.Name Of Restaurant . . . . . .

2. Establish Year . . . . . .

2.Name of Owner (s) / GM . . . . . .

3.Other Name (if any) . . . . . .

4.N.R.C No . . . . . .

5.License No . . . . . .

6.Home address . . . . . .

. . . . . .

7.Restaurant / Business address . . . . . .

. . . . . .

8.Telephone No . . . . . .

9.Fax No . . . . . .

10.Email address . . . . . .

11.Number of Customers . . . . . .

acceptable at once . . . . . .

12.Number of Branch . . . . . .

13.Type of Member ☐ **Member** ☐ **Relative Member**

14.Type of Food . . . . . .

15.Type of Cuisine . . . . . .

16.Type of Services . . . . . .

17.Number of Employee in one Branch . . . . . .

18.Opening & Closing Hours . . . . . .

19. Experience in Restaurant Industry . . . . . .

20. Social Media (Facebook,Instagram,Twitter, etc.) . . . . . .

"Photo"
Front View of your Restaurant
သင်၏စားသောက်ဆိုင်အရှေ့မျက်နှာစာမြင်ကွင်း

"Photo"
Inside View of your Restaurant
သင်၏စားသောက်ဆိုင်အထဲခင်းကျင်းထားပုံမြင်ကွင်း

We certify that the above information is true and correct and we would like to become a member of Myanmar Restaurant Association (MRA).

Signature . . . . . .
Name . . . . . .
Designation . . . . . .
Date . . . . . .

For Office Use Only

Membership Status:	Membership No: . . . . .
Effective Date:	Date Approved: . . . . .
Remarks:	
Signature:	