



MEMBERSHIP FORM

- 1. Name of Organization/Company.....
- 2. Name of CEO.....
- 3. Name of Directors/Partners.....
- 4. Organization Details: Public/ Private/ If others, pls specify.....
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- 5. CIN/ Registration Number:
- 6. PAN Number:
- 7. MSME Number:
- 8. GSTN:
- 9. Year of Incorporation.....
- 10. Number of Employees.....
- 11. Nature of Activity: Manufacturing/ Service Provider/ Trading Others, please specify.....
- 12. Industry Type: Large/ Medium/ Small/ Micro
- 13. Dealing in Specific Sector/Industry:
- 14. Name of Associates/Group Companies.....
- 15. Turnover or Gross Income Rs.....
- 16. Registered/ Corporate Address:
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Tel:Fax:E-mail:
- 17. Name, Designation and address of Representative of organization for Liaising with The Mobile Association.....
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Tel:Fax:E-mail:



Membership Fees & Payment Details:

Annual Membership Fees: INR 11,000/USD 169.00 plus GST

Cheque/Demand Draft to be drawn in favor of "The Mobile Association" and should be delivered to:

Secretary, The Mobile Association, No. 130, Prabhu Complex, Shiva Market, Madhuban Chowk, Delhi - 110085, India.

For electronic fund transfer details, please write to hello@themobileassociation.in

Signature.....

First Name:Last Name:

Designation:

Place:

Date:

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