



INDIAN EXHIBITIONS CONFERENCES & EVENTS SERVICES ASSOCIATION

Regd. Office:

Vashisht House, 7/3, Bagumpur, Kalu Sarai, New Delhi – 110017.

Phone : 011-43052661-43052662 / 42686661 ; Email : secretary@iesa.net.in

Website : www.iesa.net.in

MEMBERSHIP FORM

1. Name of the Establishment _____

2. Type of the Establishment Proprietorship / Partnership / Private Limited / Public Limited

3. Address _____

4. Phone: _____ Mobile: _____ Email : _____

(a) Year of the Estd. _____ (b) VAT No. _____

(c) TIN No. _____ (d) PAN No. _____

(e) Service Tax No. _____ (f) Turnover _____ in F.Y. _____

(g) GSTIN _____

5. (a) Nature of Business _____

Trade classification under which you would like to be listed in the Membership Directory

6. (a) Name of Proprietor / Partners / Directors _____

Residential Address _____

Phone/Mobile No. _____ Email: _____ Date of Birth _____

(b) Name of Proprietor / Partners / Directors _____

Residential Address _____

Phone/Mobile No. _____ Email: _____ Date of Birth _____

We agree to abide by the Memorandum and Rules and Regulations of the **Indian Exhibitions, Conferences & Events Services Association (IESA)**.

Signature

7. We agree that the decision of the Executive Committee of the Association shall be final and binding. We are enclosing herewith a Cheques / Cash for the Financial Year 2017-2018:

Rs. _____ towards Admission Fee vide Cheque No. _____ drawn on bank _____

Rs. _____ as Annual Subscription Fee vide Cheque No. _____ drawn on Bank _____

Membership	Admission Fee	Annual Subscription Fee
Executive Member	50,000/-	10,000/- + 18% GST
Ordinary Member	25,000/-	5,000/- + 18% GST

Dated : _____ **Rubber Stamp of the Firm** **Signature**

(I) Certified that I have known the applicant for _____ years.

Proposer's : _____

Signature : _____

Rubber Stamp of the Proposer

Name of the Firm : _____

(II) Certified that I have known the applicant for _____ Years.

Secunder's : _____

Signature : _____

Rubber Stamp of the Secunder

Name of the Firm : _____

N.B. : The Proposer and the Secunder should be IESA Members and at least one of them should be from the same city.

(To be filled by Office)

Rs. _____ Received on _____ by Cheque / Cash for Founder /

Executive / Ordinary Member and Receipt No. _____ Dated _____ issued to

_____ Membership Application considered by the Executive Committee on _____ at _____

Accepted / Rejected Noted at Membership No. _____ in the Register of IESA Members.

General Secretary