



# THE INSTITUTE OF INDIAN FOUNDRYMEN

(Affiliated to WFO, AFF, BRICS Foundry Forum, FDC, CII and accredited by NABET)

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Website : www.indianfoundry.org

## MEMBERSHIP ADMISSION FORM

Please fill in all the details in CAPITAL LETTERS and use BLACK INK only. Please (✓) appropriate option only.

\*Chapter : \_\_\_\_\_ \*Chapter Code :     \*Region Code :

\*Membership No. : \_\_\_\_\_ (\*To be filled by H.O. of the IIF)

### APPLICATION DETAILS

<b>Name :</b>															
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Date of Incorporation / Date of Birth :</b>										<b>Existing Membership No. (if any) :</b>					
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Academic Qualification :</b>															

### COMMUNICATION ADDRESS

<b>Particulars :</b>															
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>State :</b>										<b>PIN:</b>					
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Telephone :</b>										<b>Mobile :</b>					
<b>E-mail ID :</b>										<b>Website :</b>					

### REGISTERED ADDRESS (For Entities) / RESIDENCE ADDRESS (For Proprietor / Individual)

Same as Communication Address. Yes  No  (If no, fill the details below)

<b>Particulars :</b>															
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>State :</b>										<b>PIN:</b>					
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
<b>Telephone :</b>										<b>Mobile :</b>					
<b>E-mail ID :</b>										<b>Website :</b>					
<b>PAN OF APPLICANT :</b>										<b>BLOOD GROUP :</b>					

### CONSTITUTION (Please tick one)

INDIVIDUAL  SOLE PROPRIETOR  PARTNERSHIP  PRIVATE LTD.  PUBLIC LTD.  INSTITUTION  
 STUDENT  STATUTORY BODY / GOVERNMENT BODY  LLP  
 FOREIGN INDUSTRY  FOREIGN INDIVIDUAL  OTHERS : \_\_\_\_\_

### CATEGORY (Please tick one)

FOUNDRY  EQUIPMENT SUPPLIER  MATERIAL SUPPLIER  OTHER SERVICE PROVIDER

I, the undersigned, do hereby request to be admitted to the class of membership as decided by "The Institute of Indian Foundrymen". If admitted, I undertake to pay the prevailing fees for the membership within due date and also abide by the rules and regulations of the Institute.

The information stated in this form is true to the best of my knowledge and belief and if found otherwise, my membership is liable to be cancelled.

No. of Representatives :  2  4  7  10  12

Turnover (Rs. Crore) :  <1  1-5  5-10  10-50  50 >

Tick as applicable

↓ Signature & Seal ↓

Date :  Place :

**Note :** 1) All fields are to be mandatorily filled up by the applicant.

2) Enclose copy of PAN and Address proof.

3) Enclose Business Profile for Industry members.

4) For Individual Member Employer address to be given in communication address.

P.T.O.

Proposer Name :

Membership No. :

Residential Address :

E-mail ID :  Mobile :

Signature of Proposer :

Seconder Name :

Membership No. :

Residential Address :

E-mail ID :  Mobile :

Signature of Seconder :

### Membership Subscription (2017-2018)

Category	Yearly Subscription	Admission	Service Tax & Cess@15%	Total
Individual Member	Rs. 2000	Rs. 300	Rs. 345	Rs. 2645
Student Member	Rs. 300	-----	Rs. 45	Rs. 345
Institutional	Rs. 5000	Rs. 1500	Rs. 975	Rs. 7475

### Industry Membership Subscription (2017-2018)

Category	Yearly Subscription	Admission	Service Tax & Cess@15%	Total
Below 1 Crore	Rs. 3000	Rs. 1000	Rs. 600	Rs. 4600
1 Crore to 5 Crore	Rs. 5000	Rs. 1500	Rs. 975	Rs. 7475
5 Crore to 10 Crore	Rs. 8000	Rs. 2500	Rs. 1575	Rs.12075
Above 10 Crore	Rs. 16000	Rs. 5000	Rs. 3150	Rs.24150

### Foreign Membership Subscription (2017-2018)

Category	Yearly Subscription	Admission	Service Tax & Cess@15%	Total
Individual Member	US \$ 75.00	US \$ 25.00	US \$15.00	US \$ 115.00
Industry Member	US \$ 250.00	US \$ 75.00	US \$48.75	US \$ 373.75

#### Note :

- 1) Year means April to March.
- 2) If the application is made during the 2nd half of the year i.e. on 1st October or thereafter, only 50% of the subscription + full admission fee + service tax @ 15% on both are payable for the year.
- 3) Indian Foundry Journal will be despatched from the month of admission / renewal.
- 4) Payment should be made in favour of "The Institute of Indian Foundrymen" payable at Kolkata, India.
- 5) Service tax and cess are applicable till implementation of GST, after which prevailing GST rate will be applicable.

#### For IIF use only :

Name & signature of Official approving the membership.

Name : \_\_\_\_\_

Designation : \_\_\_\_\_

Signature : \_\_\_\_\_