To, Indian Society For Training & Development "Training House" B-41, Institutional Area, New Mehrauli Road New Delhi-110016

1. ANNUAL MEMBERSHIP



Tel: 26867710, 26857157 Fax: 011-26867607

E-mail: istd@nic.in / istdtrg@airtelbroadband.in

Visit us at : www.istdtrg.org

## INSTITUTIONAL MEMBERSHIP FORM (ANNUAL/PERMANENT)

Dear Sir,

Our Organisation desires to become an Institutional Member of the Indian Society for Training & Development and accordingly provide the required particulars as given on the reverse.

We agree to abide by the Memorandum of Association and Rules & Regulations of the Society as in force from time to time.

	(i) W	e enclose a cheque*/bank draft No	dated			
		n onfor Rs. 750				
		Annual Subscription Rs. 9000/- for the per				
	Draw	re enclose a cheque*/bank draft No	0/-(Entrance fee Rs. 1000/-	and		
2.	PERM	MANENT MEMBERSHIP				
	Draw	nclose a cheque*/bank draft Nofor Rs. n onfor Rs. ermanent Membership Subscription Rs. 76,50	75,000/- (Entrance fee Rs.	1500/-		
3.	For N	or N G O's (with less than 15 members & non-profit making)				
	i)	We enclose a cheque*/bank draft No for Rs. 2,000/- (En Subscription Rs. 1000/- for the period April	trance fee Rs. 1000/- and	Annual		
	ii)	We enclose a cheque*/bank draft No on for Rs. 11,000/- Permanent Membership Subscription Rs. 10	(Entrance fee Rs. 1000			

## Yours' Faithfully,

	SignatureName	
	Designation	
	Organization	
Date		
Date Place		

 $Please \ send \ cheque/demand \ draft \ in \ favour \ of \ ``Indian \ Society \ for \ Training \ \& \ Development, \ New \ Delhi"$ 

\*Please add Rs 50/- for outstation cheque.

## Please type or write in Capital Letters

	or Organisation		
			oile:
E-Mail :		_	
(a) Nature of Orga	nication		
(h) Number of Fm	nlovees		
(c) Size of Trainin	g Department if any		
(d) Other Details (	Training centre, train	ning course etc.	) Use extra sheet, if necessa
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	and address of Nom	ninees (Two)	
1 <sup>st</sup> Nominee			
Name			
11aiiic			
Designation			
Address			
			_Pin
			_Tel Res:
Email:		Mobile:	
and Naminas			
2 <sup>nd</sup> Nominee			
Name			
Address			
			Pin
Tel Off.	Tel R	Res:	Fax:
	FOR O	FFICE USE O	NLY
Entrance Fee recei	ved Rs		Date of Admittance by the
	ved Rs		National Council
			··· · · · · · · · · · · · · · · · · ·
Membership No.		<del>_</del>	