

APPLICATION FORM FOR MEMBERSHIP

No.

The Chief Executive Officer,
All India Sugar Trade Association,
3rd Floor, South Delhi House, 12, Zamrudpur Community Center, New Delhi-110048.
Tel: 011-49026174 | Email: ceo@aista.co.in

Dear Sir,

Subject: Application for seeking membership of All India Sugar Trade Association (AISTA)

I/We desire to enroll ourselves as Founder / Distinguished / Special / Ordinary / Institutional / Associate members of your Association and furnish below the required particulars for your record and use.

1 Class of Membership : Founder Distinguished Associate Ordinary Affiliated Honorary

2 Member Details : Name of the Firm/Company/Society/Institution : _____

Address : _____

City : _____ Dist: _____

Pin : _____ State: _____

Telephone :1) _____ 2) _____ 3) _____

Fax : _____ Residence : _____

Email :1) _____ 2) _____

Website : _____

3 Type of the Business of the Firm / Company / Society / Institution :

Trader Importer Sugar Miller Surveyor Transporter Shipping agent

Broker Exporter Refiner Test house Warehousing

any other (please specify) : _____

4 Constitution of the Business of the Firm / Company / Institution :

Proprietorship Partnership Public Limited Co-operative Society

Public Sector Limited Liability Partnership Private Limited District or state Institution

any other (please specify) : _____

5 Name and address of all the Directors / Partners / Managing Committee Members
along with their direct landline Telephone, Mobile & Email : **(Please attach separate note sheet)**

6 Name of three Representatives (Write in order of preferences)

Principal: 1) Name: _____

Email: _____ Landline: _____ Mobile: _____

Alternate: 1) Name: _____

Email: _____ Landline: _____ Mobile: _____

2) Name: _____

Email: _____ Landline: _____ Mobile: _____

APPLICATION FORM FOR MEMBERSHIP

7 Name of the Authority with which the Firm / Company / Society / Institution is registered :

Registration No. _____ Date : _____

8 Name(s) of the representative if any : Delhi Mumbai

Email: _____ Landline: _____ Mobile: _____

9 Details of contribution to the corpus fund : Amount _____ Cheque D.D. RTGS/NEFT

No: _____ Bank: _____ Date: _____

10 Copies of the following documents are enclosed:

- | | |
|--|--------------------------|
| a. PAN card of the applicant; | Tick |
| b. Proof of address of the applicant; | <input type="checkbox"/> |
| c. DGFT Importer / Exporter Code (IEC). [For Importer / Exporters only]; and | <input type="checkbox"/> |
| d. Registration certificate or Incorporation certificate,
(for corporate / Co-operative Society & Partnership firms only) | <input type="checkbox"/> |

Total no. of documents annexed: _____

I / we confirm that all particulars stated herein above and given as annexures are valid and correct.

I / we state that I / we shall abide by the Rules / Regulations of the All India Sugar Trade Association (AISTA) and follow all decisions of the Managing Committee / General Body taken from time to time.

I / we also undertake to pay all subscriptions including annual subscription in time, as fixed by the Managing Committee from time to time.

I / we are fully aware that the contribution to the Corpus fund and other subscriptions paid to the Association shall not be refundable under any circumstances.

Proposed by :

Name : _____

Sign : _____

For M/s. _____

Name , Designation, Sign along with the seal

Seconded by :

Name : _____

Sign : _____

For official use only

Place: _____

Admitted / Not admitted

Date: _____

CEO

President