



G5, Laxmi woollen mill estate, Shakti Mill Lane, Near Mahalaxmi Station, Mumbai 400 011.
 Tel : 2498 2401 ■ Fax : 2498 2403 ■ Email : tait@vsnl.com ■ Website : www.tait-mumbai.com

Membership Application Form

Company Name : _____ L.S.T.No. : _____

Address : _____ C.S.T.No. : _____

_____ I.T.PAN No. : _____

Hello : 1) _____ 2) _____ 3) _____ FAX : _____

Mobile : _____ Email : _____ Website : _____

Proposer's Company : _____ Seconder Company : _____

_____ Sign

_____ Sign

Constitution :- Proprietorship / Partnership / Public Ltd. / Pvt. Ltd. _____

Year of Estd :- _____

Details of Proprietors / Partners / Directors of the Company

1) 

2) 

Name :- _____

Name :- _____

Date of Birth :- _____ Age :- _____

Date of Birth :- _____

Res. Add :- _____

Res. Add :- _____

Blood Group _____

Blood Group _____

Edu. Qualification : _____

Edu. Qualification : _____

Tel. No.(R): _____ Mob : _____

Tel. No.(R): _____ Mob : _____

Trade References :-

1) Company Name :- _____ Contact :- _____ Tel :- _____ Credit Limit :- _____

2) Company Name :- _____ Contact :- _____ Tel :- _____ Credit Limit :- _____

Designate any one for TAIT Communication (Specify name) : _____



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Banker's Name : _____

Address : _____

_____ A/C No. : _____

HOW WOULD YOU LIKE TO DESCRIBE YOUR BUSINESS :

- | | |
|--|---|
| <input type="checkbox"/> Value Added Reseller | <input type="checkbox"/> Computer Manufacturers |
| <input type="checkbox"/> System Integrator | <input type="checkbox"/> Computer Maintenance |
| <input type="checkbox"/> Software Development | <input type="checkbox"/> Distributor/Wholesaler |
| <input type="checkbox"/> Software Package Sales Supply | <input type="checkbox"/> Retail Showroom |

WHAT ARE YOUR EXPECTATIONS FROM TAIT _____

NAMES OF ASSOCIATED COMPANIES OVER WHICH YOU HAVE PROPRIETARY INTEREST :

- | | |
|----------|----------|
| 1) _____ | 2) _____ |
| 3) _____ | 4) _____ |

I, as person having authority to do so, apply on behalf of my company for membership of TAIT should my application be accepted, I agree to support the Association to the fullest of my capabilities.

Name : _____ Date: _____ Sign: _____

Please Tick:

One time Membership Fee of Rs.5,000 per Company :

Annual Subscription Fee of Rs.3,000 for the First Member of the Company :

Annual Subscription Fee of Rs.3,000 for the Additional Member of the Company :

Enclosed Please find our Cheque/Payorder# _____ Drawn on _____ Dt. _____

For Rupees : _____ (in figures) _____

All Cheques to be drawn in favour of "TRADE ASSOCIATION OF INFORMATION TECHNOLOGY" Payable at MUMBAI.
 Please attach on a separate sheet of your Company's Profile and suggestions if any.

OFFICIAL USE ONLY

Date Of Acceptance : _____ Membership#: _____

Referred By: _____

Remarks: _____

NAME: _____

Please Note : Only 1 Person from each Company will be allowed to attend TAIT Meetings