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**INDIA BUSINESS DISABILITY NETWORK**

**A CII-ILO-EFI Partnership**

EXECUTIVE MEMBERSHIP FORM

1. **Name of the organisation**……………………………………………………………………
2. **Official Address** ……………………………………………………...…………………………………………...

……………………………………………………………………………………………………

…………………………………………………….**Pin:** ………………………………………..

1. **Tel No**………………….……………………….. **Fax:**………………………………………...
2. **E-mail:** ……………………..…………………………………………………………………..

1. **CII Membership No (if you are a member)………………………………………………**
2. **Contact 1**
3. Name ……….……………………………………………….…………………...
4. Designation ………………………………………………………………………
5. Mobile: .……………………………………………………………………………
6. E-mail: …………..………..………………………………………………………..
7. **Contact 2.**
8. Name ……….……………………………………………….…………………......
9. Designation ………………………………………………………………………..
10. Mobile: .……………………………………………………………………………..
11. E-mail: …………..………..…………………………………………………………
12. **Size of the organisation:**

  

1. **Type of Organization**

 

1. Type of Sector

**Choose an item.**

Others ……………………………………………………………………………………..

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**Executive Membership Fee:**

* Large Scale Industry (Turnover of INR 250 cr or above) : **35000 + GST(p.a)**
* Medium Scale Industry (Turnover INR 50-250 cr) : **15000 + GST(p.a)**
* Small Scale Industry (Turnover upto INR 50 cr) : **7500 + GST(p.a)**

**Mode of Payment :**

You may pay by cheque/ demand draft in favour of "CONFEDERATION OF INDIAN INDUSTRY" payable

at New Delhi and forward it to our address:

Bank details for remittance:

Account Holder Name: CONFEDERATION OF INDIAN INDUSTRY

Bank Name and Address: STANDARD CHARTERED BANK , 23 Barakhamba Road, Narain Manzil

New Delhi- 110001

Bank Account Number : 522-0-503577-5

IFSC Code : SCBL0036020

Type of account : CURRENT ACCOUNT

MICR : 110036002

*For details contact: ibdn@cii.in*

**For action at CII**

**Membership Serial No…………………………………..allotted and register**

Date**…………………………** Name & Signature of the Officer**…………………………..**