

3-5, DDA Shopping Complex, Hargobind Enclave Vikas Marg Ext. Delhi-110092

Tele: 011-42207478; Email: info@ipcaworld.co.in

web: www.ipcaworld.co.in

Membership Form

Membership Application for **Honorary Membership *** **Corporate Membership**
 Life Membership **Student Membership**
 Annual Membership

Name Mr./Ms./Mrs./Dr. _____
(First) (Middle) (Surname)

Date of Birth ____/____/____ Preferred postal address for deliveries Business Home
dd/mm/yy

Email Id _____ Alternate email _____

Business address _____

_____ Tel. Landline with STD _____

_____ Pin Code _____ Tel. Mobile _____

Home address _____ Tel. Landline with STD _____

_____ PIN code _____

Online Address (e.g. Skype/Facebook/Linked-In/Twitter/Any other) _____

Education

Course Attended	University Name	City/Country	Year	
			From	To
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Employment (in last 10 years)

Period (From/To)	Company Name	Position held	Responsibility
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

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Paper Published:

Yes

No

If yes, topic and area of subject _____

Membership Fee

**Honorary members are exempted from the membership fee.*

Membership Charges:

Type	Charges (Rs.)	Renewal Time (Yrs.)
Corporate Membership	20,000.00	2 yrs.
Life Membership	1100.00	Life time membership
Student Membership	500.00	1 yrs.
Annual Membership	150.00	1 yrs.

The Cheque/Demand Draft should be in favor of "Indian Pollution Control Association" payable at New Delhi.

Payment Detail

Cheque/Draft Numbr: _____ Amount: _____ Drawn on: _____ Dated: _____

CERTIFICATE BY THE APPLICANT

I hereby certify that the information provided above is true and correct to the best of my knowledge and if admitted, I will abide by the constitution and the rule & regulations of **IPCA**.

Date: _____

Applicant's Signature: _____

For Office Use:

Admit

Reject

Membership Grade _____

Membership # _____