

INDIAN SOCIETY FOR TRENCHLESS TECHNOLOGY (INDSTT)

MEMBERSHIP FORM

(INSTITUTIONAL/CORPORATE / INDIVIDUAL / PROFESSIONAL / AFFILIATE / FELLOW / PATRON MEMBERSHIP)

Dt:

Contd/..

908 89, Nev	e Secretary, ian Society for Trenchless Technology, B, Hemkunt Chambers, Nehru Place, w Delhi-110019 (India) : +91-11-47670800		Dt:
Dea	r Sir,		
	dly enroll us/me in the Indian Society for Trenchles		CORPORATE /
	r/my main particulars are given below and a deta his form.	iled Company Profile / CV is enclosed as	an attachment
<u>De</u>	<u>tails</u>		
1.	Name of the Organization / Individual (Please also mention the Name & Designation of the Contact Person in case of organization)	:	
2.	Office Address	:	
3.	Office Tel. / Fax / Mobile No.	:	
4.	Email / Website Address	:	
5.	Residential Address	:	
6.	Residential Tel. / Fax No.	:	(Signature) with Seal

Declarations

Membership Category

Membership Number

Next date of Fee due

- 1. We/I agree to provide further detail, if any what so ever, needed by you upon request.
- 2. We/I solemnly declare and undertakethat all the information given above and in the attachment to this letter is true to the best of our/my knowledge and belief.
- 3. We/I agree to accept the decision of the Governing Council in the regard of our/my Membership which shall be final and binding on us/me.
- 4. We/I further declare that shall follow the and ethics of conduct as prescribed/revised time to time for the Members.

Payment Details		
-	heque/DD Nofavou	ring "Indian Society for Trenchless
Technology" drawn on	(Bank) Date	for ₹
(Admission Fee ₹ Mer	mbership Fee ₹Life Me	embership Fee ₹)
Thanking you,		Yours faithfully,
		(Signature) with Seal
(3) Foreign applicant's fee ma(4) Membership is subject to S(5) Voting rights shall be subject	oility shall be decided by the Council and ay be paid in US\$ or equivalent amount Society rules as in force and shall be su ect to Society rules as in force. company the requisite fee (Admission +	bject to the directives of the Council.
	FOR OFFICE USE ONLY	
Date of Application	<i>:</i>	
Date of Fee Payment	:	
Forwarded to Membership Committee on	:	
Recommendation	<i>:</i>	