



# SOUTH INDIA MICE ASSOCIATION (SIMA)

148, Perambur Barracks Road, AB Towers, Purasaiwakkam, Chennai – 600 007.

Phone : +91 9884044555 ; Email : sima@gmail.com, simachennai2020@gmail.com

## MEMBERSHIP FORM

1. Name of the Establishment \_\_\_\_\_

2. Type of the Establishment Proprietorship / Partnership / Private Limited / Public Limited

3. Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Phone: \_\_\_\_\_ Mobile: \_\_\_\_\_ Email \_\_\_\_\_

(a) Year of the Estd. \_\_\_\_\_ (b) VAT No. \_\_\_\_\_

(c) TIN No. \_\_\_\_\_ (d) PAN No. \_\_\_\_\_

(e) Service Tax No. \_\_\_\_\_ (f) Turnover \_\_\_\_\_ in F.Y. \_\_\_\_\_

(g) GSTIN \_\_\_\_\_

5. (a) Nature of Business \_\_\_\_\_

Trade classification under which you would like to be listed in the Membership Directory

\_\_\_\_\_

6. (a) Name of Proprietor / Partners / Directors \_\_\_\_\_

Residential Address \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone/Mobile No. \_\_\_\_\_ Email: \_\_\_\_\_ Date of Birth \_\_\_\_\_

(b) Name of Proprietor / Partners / Directors \_\_\_\_\_

Residential Address \_\_\_\_\_

Phone/Mobile No. \_\_\_\_\_ Email: \_\_\_\_\_ Date of Birth \_\_\_\_\_

We agree to abide by the Memorandum and Rules and Regulations of the **South India MICE Association (SIMA)**.

**Signature**

7. We agree that the decision of the South India MICE Association shall be final and binding.

We are enclosing herewith a Cheques / Cash for the Financial Year 2020-2021:

Rs. \_\_\_\_\_ towards Admission Fee vide Cheque No. \_\_\_\_\_ drawn on bank \_\_\_\_\_

Rs. \_\_\_\_\_ as Annual Subscription Fee vide Cheque No. \_\_\_\_\_ drawn on Bank \_\_\_\_\_

<b>Membership</b>	<b>Admission Fee</b>	<b>Annual Subscription Fee</b>
Executive Member	2,000/-	3,000/-
Associate Member	2,000/-	3,000/-
Institutional Member		10,000/-

**Dated :** \_\_\_\_\_ **Rubber Stamp of the Firm** **Signature**

(I) Certified that I have known the applicant for \_\_\_\_\_ years.

Proposer's : \_\_\_\_\_

Signature : \_\_\_\_\_

Rubber Stamp of the Proposer Name of the Firm : \_\_\_\_\_

(II) Certified that I have known the applicant for \_\_\_\_\_ Years.

Secunder's : \_\_\_\_\_

Signature : \_\_\_\_\_

Rubber Stamp of the Secunder

Name of the Firm : \_\_\_\_\_

**N.B. : The Proposer and the Secunder should be SIMA Members and at least one of them should be from the same city.**

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**( To be filled by Office )**

Rs. \_\_\_\_\_ Received on \_\_\_\_\_ by Cheque / Cash for Founder /

Executive / Ordinary Member and Receipt No. \_\_\_\_\_ Dated \_\_\_\_\_ issued to \_\_\_\_\_

Membership Application considered by the Executive Committee on \_\_\_\_\_ at \_\_\_\_\_

Accepted / Rejected Noted at Membership No. \_\_\_\_\_ in the Register of SIMA Members.

**General Secretary**