



**THE INSTITUTE OF
Company Secretaries of India**
भारतीय कम्पनी सचिव संस्थान
IN PURSUIT OF PROFESSIONAL EXCELLENCE
Statutory body under an Act of Parliament
(Under the jurisdiction of Ministry of Corporate Affairs)

INDORE CHAPTER

Annual Membership Scheme (AMS Scheme-2020) Registration Form

Indore Chapter of ICSI
B/1-2-3 Ashray Apartment, 2/1 Manoramaganj
Indore - 452001

Please register the following person(s) as delegate(s) for attending the programmes under Annual Membership Scheme (AMS) being organized by Indore Chapter for the year 2020.

Name of Applicant	:			
FCS/ACS/Student Reg. No.(if any)	:		CP No	:
Category opted (please tick √)	:	A	B	C
Name of the Organization	:			
Address of the Organization	:			
GST No. (if any) for input Credit Please attach copy of certificate	:			
Person authorized to attend (applicable only for Category B) *Name and Designation	:	1. 2. 3. 4. * mail the name of one delegate before 3 days advance of any Program at indore@icsi.edu		
Contact Details: Ph No Office:	:			
Mobile*	:			
Email ID*	:			
Payment Details: (Tick)	:	Rs.		
Voluntary Donation to CSBF	:	Rs.		
Payment Mode (Tick)	:	Cash/Cheque/NEFT/Card		
Cheque No./ Date/ Bank or Online Transaction Number (if applicable)	:			

I/We confirm that we have read all terms & Condition of Annual Membership Scheme-2020.

Date

Place

Sign