



**DELHI MANAGEMENT ASSOCIATION**

India Habitat Centre, Core 6-A, 1st floor

Lodi Road , New Delhi – 110 003

Phone : 24649551, 24649552

E-mail : info@dmadelihi.org

Website : dmadelihi.org

**MEMBERSHIP APPLICATION FORM**

Category Applied for

PATRON

ORGANIZATION

LIFE

A **NAME OF ORGANIZATION :** \_\_\_\_\_

Address: \_\_\_\_\_

Head Office (if different from above)

\_\_\_\_\_

B **CATEGORY APPLIED FOR:** Life Patron Organization  
Number of persons employed in your Organisation \_\_\_\_\_

C **FORM OF ORGANIZATION:**  
Partnership Sole Proprietorship Public Limited  
Private Limited Government Undertaking Others

D **ANNUAL TURNOVER**  
(If possible enclose the latest annual report and audited statement of accounts)

E **NATURE OF BUSINESS :** Product/ Services offered

F **REPRESENTATIVE OF ORGANIZATION**  
Name : \_\_\_\_\_ Address : \_\_\_\_\_  
Designation : \_\_\_\_\_  
Tel : \_\_\_\_\_ Mobile : \_\_\_\_\_ Fax: \_\_\_\_\_  
Email : \_\_\_\_\_  
CEO of Organisation : \_\_\_\_\_

Executive responsible for Training Activities:

G **DECLARATION**  
We declare that the statements made herein are correct to the best of our knowledge and belief. We agree, when elected as a member of the Association, to abide by the Rules and Regulations Of the Delhi Management Association.

For and on behalf of

Name : \_\_\_\_\_ Signed  
Date : \_\_\_\_\_

Enclosed cheque/draft No-----dated-----for Rs. -----  
In favour of **Delhi Management Association**

**For Office use only**

**Recommendations**

Director  
Date of Enrolment-----

Chairman - Membership Committee  
Membership No-----

**Please mail this to:**

Officer- Administration & Membership  
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