



MEMBERSHIP APPLICATION FORM

TO

THE HON'RY SECRETARY,

THE GANJAM CHAMBER OF COMMERCE (Regd.),

BERHAMPUR (GM) – 760002, ODISHA .

Sir,

I/We requested you to admit me / us as Member / Life Member / Associate Member of the Ganjam Chamber Of Commerce, Berhampur . I / We have deposited the admission fee of Rs. (Rupeesonly) and subscription of Rs. (Rupees.....only)for the periodby Cash /Bank draft/Cheque

No.Date On

1 . NAME OF THE ESTABLISHMENT / PERSON :

2 . ADDRESS

OFFICE :

RESIDENT :

3 . PHONE NO. (O)

(R)

MOBILE :

4 . E.MAIL :

5 . DETAILS OF REGISTRATION / LISENCE / TIN / SRIN NO.

INCOME TAX PAN NO :

CENTRAL EXCISE No.

FOOD LISENCE No

6 . NATURE OF BUSINESS / PROFESION :

7 . DATE AND YEAR OF COMMENCEMENT :

8 . NAME OF THE PROPRIETOR /

PARTNER / DIRECTORS: 1:

4:

2:

5:

3:

6:

The information given above is true and correct and as a member I/We stand committed to honour the Bye – law and constitution of the Ganjam Chamber of Commerce .

PLACE :

Date :

SIGNATURE & STATUS

Approved on .