



Registration No.12 / 1992
(Subject to Chennai Jurisdiction Only)

MADRAS HIRE PURCHASE ASSOCIATION

(Affiliated to Federation of Indian Hire Purchase Association)

Heerachand Goutamchand Nahar Chamber
Golden Complex, Old No.128, New No.220, N.S.C. Bose Road,
4th Floor, Chennai - 600 079. Telefax : 2536 0810

E-mail: madrashirepurchase@rediffmail.com Website: www.mahachennai.com

MEMBERSHIP APPLICATION FORM

Annual Membership : Entrance Fee Rs. 500/- and Annual Subscription Rs. 1000/-
Life Membership : Rs. 7500/-
Associate Life Membership : Rs. 10,000/-
Long Term Membership : Rs. 15,000/- (for 15 years)

I/We wish to apply (as per the particulars given below) and request you to enroll me/ us as the Member of **Madras Hire Purchase Association**. I/We will abide by the Rules and Regulations of the Association prevailing fromtime to time. I/We am/are remitting the required fee by cash/cheque, Rs.
Cheque No. dated drawn on

PARTICULARS

Name : Age :
Father's Name :

OFFICE ADDRESS

Name of the Building/Complex :
Name of the Office :
Old Door Number : New Door No.:
Office / Suit / Shop Number : Floor:
Name of the Road / Street :
Area :
City / Town : Pincode :

RESIDENCE ADDRESS

Name of the Building/Complex :
Name of the Office :
Old Door Number : New Door No. :
Office / Suit / Shop Number : Floor :
Name of the Road / Street :
Area :
City / Town : Pincode :

COMMUNICATION ADDRESS

Telephone Office :
Telephone Residence :
Mobile : Fax :
E-mail :

TYPE OF MEMBERSHIP

(Please tick)

- ☐ Annual Membership
 ☐ Life Membership
☐ Associate Membership
 ☐ Long Term Membership

STATUS OF YOURSELF IN YOUR COMPANY

(Please tick)

- ☐ Proprietor
 ☐ Partner
 ☐ Director
 ☐ Others

STATUS OF COMPANY

(Please tick)

- ☐ Individual
 ☐ Partnership Firm
 ☐ Limited Company
 ☐ Others

TYPE OF BUSINESS

(Please tick)

- ☐ Hire Purchase
 ☐ Leasing
 ☐ Hypothecation

Introducer's Name :

Address & Phone Numbers :

Introducer's Signature :

NAME OF THE ASSOCIATES

(To be filled in case you are applying for an Associate Member)

Sl. No.	Name of the Associate	Relationship with Applicant
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.....
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Date :

Signature of an Applicant
(Please affix seal in case is a firm or Company)

FOR OFFICE USE ONLY

Received application on.....and approved at the Executive Committee Meeting held on.....and admitted as an Annual Member / Life Member / Associate Life Member / Long Term Member with effect from.....

Receipt Number.....dated.....

Chairman-Membership Development

Secretary