

Membership Application Form

To,
The Secretary
Designers Interiors Architects Welfare Association
Kolkata

Passport
size
Photo

Dear Sir / Mam,

I hereby apply for enlistment as an active member of your Association based on the Application Form, duly completed and submitted along with the relevant supporting documents.

As desired the following details are furnished for necessary record :

Personal Information

Name : _____

Date of birth : dd/mm/yy _____ Blood Group _____

Spouse details : H/W : _____ D.O.B. / / _____ Anniversary: / / _____

Children : 1. _____ 2. _____
D.O.B. D.O.B.

Residence : _____
_____ Pin _____

Office : _____
_____ Pin _____

Phone : Office _____ Residence _____ Mobile _____

Email : _____ Website _____

Address for Comm. : (Please put X in box) : Office Residence

Whether affiliated to member of any other Association / Chamber _____ Yes _____ No

If yes, Name and Address thereof _____

Academic Information

(Kindly attach testimonials of technical qualifications only, as applicable)

Institute / University _____ Year _____
Qualification _____

Designers Interiors Architects Welfare Association

West Bengal Societies Act XXXI of 1961
S/1LI No. 61428 of 2009-2010

31, Giribabu Lane, Kolkata - 700 012

Ph. : +91 9051798999

E-mail : info@diaforum.in

Website : www.diaforum.in

President

Mr. Kallol Baroi
09830025581

Vice-President

Mr. Reetesh Jain
09830058331

Secretary

Mr. Brijen Joshi
098308 81199

Treasurer

Mr. Rakesh Agarwal
098300 80764

P. R. O.

Mr. Deborup Das
098300 59421

Mr. Manish Chhaohharia
098300 89808

Mr. Manjit Singh Matharoo
098310 20227

Professional Information :

(Kindly share your journey of experience in your domain, accolades and achievements)

Why you want to be a DIA Member ?

Special Interest:

Referee (preferably DIA Member)

1. Name : _____ Mobile No. : _____
2. Name : _____ Mobile No. : _____

The above information is true to the best of my knowledge and information.

Date _____ Signature _____

** Filling of this form does not entitled Membership

FOR OFFICE USE ONLY

(ON ACCEPTANCE OF MEMBERS BASED ON THE DOCUMENTS AND PROCEDURAL FORMALITIES)

Membership Recommended:

1. LIFE MEMBERS 2. CO MEMBERS 3. CORPORATE MEMBERS 4. MEMBER NOMINATE 5. STUDENT MEMBER

Payment Details : Cheque/DD No. _____ of _____ (Rupees)

Dated _____ Drawn on _____

Proposed By : _____ Membership No. _____

Seconded By : _____ Membership No. _____

Meeting Approval Date : _____ Signature _____