



INDIAN DRUG MANUFACTURERS' ASSOCIATION

Registered under the Societies Reg. Act., XXI 1860
Reg. No. Bom. 111/1961, G.B.S.D.
Regd. under Bombay Public Trust Act 1950 (Bom. XXIX of 1950)
Reg. No. F-1514 (Bom.) Dt. 11-4-1967
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E-mail: admin@idmaindia.com / accounts@idmaindia.com
Website: www.idma-assn.org / www.indiandrugsonline.org

APPLICATION FOR MEMBERSHIP

ASSOCIATE ACADEMIC MEMBER

The Secretary-General
102-B, A-Wing, Poonam Chambers,
Dr. A.B. Road, Worli, Mumbai - 400 018.

Dear Sir,

We hereby apply to the Membership of the Association under the category of Associate Academic Member and agree to abide by the Memorandum and Rules & Regulations of the Association:

Name of the applicant (in BLOCK letters): _____

Address : _____

Telephone Nos : _____ Email : _____ Fax No : _____

Constitution whether Private or Government : _____

University / Trust : _____

Registration/incorporation (Number and date) : _____

Name and address of Affiliating University : _____

No. of seats approved for Under Graduate courses : _____

No. of seats approved for Post Graduate courses : _____

Preceding Year's Turnover : _____

International affiliation (if any) : _____

Any other relevant information : _____

Discipline	Person in Charge	Telephone No.	Email	Mobile No.

Names of Chancellor/Vice Chancellor: _____

Dean/Principal: _____ Registrar / Secretary: _____

Administrative officer: _____

Persons authorised to represent the Institution (only two):

Name

Specimen Signature

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ASSOCIATE ACADEMIC MEMBER

This category of membership is open to those academic/educational institutions which are connected with the pharmaceutical industry in India. The Annual membership fee is

Sr. No.	Particulars	Annual Membership Subscription	Service Tax @ 14%	Swachh Bharat Cess 0.50%	Krishi Kalyan Cess 0.50%	Total Amount ₹
1	Associate Academic Member	10,000	1,400	50	50	11,500

Associate Academic Members shall have no voting rights

Please Note Membership year is from April to March

(to add details as below from Membership Form)

We enclose herewith a crossed cheque/demand draft on Mumbai Bank for ₹ _____ towards the membership fee.

For (stamp of the firm/co.)

Date: _____

Director/Partner/Proprietor

- i) Application Forms are required to be proposed and seconded by two members of IDMA by their authorized signatory affixing the rubber stamp of the firm/Company.
- ii) The location of the registered office (not location of plants) will determine the State Board in which the company/firm falls.
- iii) The proposer & seconder should have renewed their membership for the current year. Otherwise, the application would be treated as incomplete and liable to be rejected.

PROPOSED BY _____ SECONDED BY _____

FOR OFFICE USE ONLY

Scrutinized & found in order : _____

PUT UP AT THE EXECUTIVE COMMITTEE MEETING HELD ON _____ AND APPROVED.

PRESIDENT, IDMA