

THE INSTITUTE OF INDIAN FOUNDRYMEN

(Affiliated to WFO, AFF, BRICS Foundry Forum, FDC, CII, AFC) H.O.: IIF CENTER, 335, Rajdanga Main Road, Kolkata - 700 107 Tel: +91 (033) 2442 7385 / 4491

E-mail: membership@indianfoundry.org Website: www.indianfoundry.org

MEMBERSHIP ADMISSION FORM

Please fill in all the details in CAPITAL LETTERS and use BLACK INK only. Please (✓) appropriate option only.

PHOTOGRAPH OF INDIVIDUAL MEMBER/ PHOTOGRAPH OF KEY PERSON FOR COMPANY

*Membership No.:		(*To be filled by H.O. of the IIF)		
	APPLICATION DETAILS			
Name :				
Date of Incorporation / Date of Birth :	d d m m y y y y Existing M	embership No. (if any) :		
Academic Qualification :				
Profession / Designation with Organization/Institution Details : (Applicable for individual membe	rs)			
	COMMUNICATION ADDRESS			
Particulars :				
State :		PIN:		
Phone No :	Mobile :	The state of the s		
E-mail ID :	The second of th	 		
GSTIN OF APPLICANT :				
PAN		 		
	Applicable for Company Members On	lv		
TURNOVER				
Short info about business/ products				
(within 50 words)				
Name of Key Person				
Designation Please (✓) appropriate option	PROPRIETOR / PARTNER /	DIRECTOR / CEO / OTHER		
For Key Person Mobile No.:	Email ID.:			
Please attach in separate exce	with representative name, design:	ation, email id and mobile number		
CONSTITUTION	CATEGORY OF MEMBERSHIP	TYPE OF MEMBERSHIP		
CAST IRON	FOUNDRY	INDIVIDUAL		
S G IRON	EQUIPMENT SUPPLIER	STUDENT		
STEEL	MATERIAL SUPPLIER	INDUSTRY		
ALLOY STEEL	CONSULTANT	ASSOCIATE		
NON-FERROUS	OTHER SERVICE PROVIDER	'		
Please (✓) appropriate option	Please (✓) appropriate option	Please (✓) appropriate option		

Note: 1) All fields are to be filled up by the applicant.
2) Enclose copy of PAN card mandatorily for the individual & GSTIN / PAN for industry.
3) Enclose list of nominated representatives as per turnover above along with business profile for industry members.

4) For Individual Member, employer address to be given in communication address, where applicable.

Proposer Name :						
Membership No.:						
Residential Address :						
E-mail ID :		Mobile :				
Signature of Proposer :						
Samuel Marian Color				TTT		
Seconder Name : Membership No.:						
Membership No						
Residential Address :						
E-mail ID :		Mobile :				
Signature of Seconder :						
New Membership Fee for FY2025-26						
CATEGORY		Admission Fees	GST @ 18%	TOTAL		
NDIVIDUAL MEMBER	3194.00	300.00	629.00	4123.00		
TUDENT MEMBER	480.00		86.00	566.00		
	New Admission M	embership Subscr				
CATEGORY		Admission Fees	-	TOTAL		
BELOW 1 Cr	4792.00	1000.00	1043.00	6835.00		
1-5 Cr	7986.00	1500.00	1707.00	11193.0		
5-10 Cr	12778.00	2500.00	2750.00	18028.00		
10-25 Cr	25289.00	5000.00	5452.00	35741.00		
25-50 Cr	29282.00	5000.00	6171.00	40453.00		
Above 50 Cr	33275.00	5000.00	6890.00	45165.00		
Foreign New Admission Membership Subscription:						
CATEGORY	SUBSCRIPTION		prion.	TOTAL		
NDIVIDUAL MEMBER	US\$133	US\$ 25		USS 158		
NDUSTRY MEMBER	US\$466	US\$ 75		USS 541		
	New Admission N		rintion:	000 043		
CATEGORY		Admission Fees		TOTAL		
ASSOCIATE MEMBER	5000.00	rumission rees	900.00	5900.00		
Foreign - AM	US\$100		200.00	USS 100		
Note:	C3\$100			C55 100		
 Full year means April to March. A For other categories, if the applica 50% of the subscription, full admi Indian Foundry Journal will be de- 4) Payment to be made in favour of Pay by ICIC: Bank A/c. No. 098301 	ation is made during the 2nd ission fee and GST @ 18% on spatched from the month of "The Institute of Indian Foun	half of the year i.e. on 1st Oo both are payable for the yea admission / renewal. drymen" payable at Kolkata,	ir. India.			
Payment Details :						
Date of payment : dd/mm/yyyy 2. Cheque/NEFT/UTR No.						
Bank Name 4. Currency Paid in : INR / USD						
. Amount Paid 6. TDS (If applicable)						
	Concent of all					
I, the undersigned, do hereby reques	LASSOCIONAL DE LA COLONIA DE L	72 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2	oided by "The leatit	uto of Indian		
Foundrymen". If admitted, I undertake and regulations of the Institute. The information stated in this form is truto be cancelled. No. of Representatives Turnover (Rs. Crore)	to pay the prevailing fees for	or the membership within dudge and belief and if found of	e date and also abid therwise, my membe	e by the rules		
Tick as applicable <1	1-5 5-10 10-	25 25-50 50>	Signature & Sea	al 1		
Date: Place :				en e		