



**The Chamber of
Tax Consultants**
Mumbai | Delhi

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COMMON ENROLMENT FORM

| Event Name | Date |
|------------|------|
| | |

Please enrol the following for the above event:

| Sr. No | Name of Person | Mobile | Email ID | Member/ Non-member/ Student | Amount |
|--------|----------------|--------|----------|-----------------------------------|--------|
| 1 | | | | | |
| 2 | | | | | |
| 3 | | | | | |
| 4 | | | | | |
| | | | | Total | |

Address _____

_____ Pin Code _____ for the following Event.

How did you come to know about the event, please tick

NewsLetter | Email | WebSite | FaceBook | WhatsApp | Friend | SMS | Unknown

We enclose herewith Cash/ Cheque No _____ drawn on _____ Bank

Dated _____ for ₹ _____/-

GST No. _____

Date: _____

Signature: _____

Note:

- Please return the form duly completed along with Cheque/DD in favour of "The Chamber of Tax Consultants".
- Outstation members are requested to make payment by Demand Draft only. Please take care in filling your address and pin code correctly.
- Kindly Fill Up separate enrolment form for each event.
- CTC GSTIN NO: 27AAATT0402B1Z8