



THE CHAMBER OF TAX CONSULTANTS

3, Rewa Chambers, Ground Floor, 31, New Marine Lines, Mumbai - 400 020

●Tel.: 2200 1787 / 2209 0423 ●2200 2455 ●E-mail: office@ctconline.org

●Visit us at: Website: <http://www.ctconline.org>

APPLICATION FOR ASSOCIATE MEMBERSHIP

One-time Entrance Fees: ` **1180/-**

[` 1,000 + ` 180 (@18% GST)]

Membership Fees: ` **5900/-**

[` 5,000 + ` 900 (@18% GST)]

Total: 1180 + 5900 = 7080/-

(For 1 year - April to March)

To,

The Hon. Secretaries
The Chamber of Tax Consultants
Mumbai

Dear Sir / Madam,

We hereby apply for Associate Membership of The Chamber of Tax Consultants. The relevant details are as under:

1. Full Name of Organisation : _____
(Company / Firm / Trust / LLP / Others)
2. Group (if any): _____
3. Mailing Address: _____

4. Telephone Nos. With STD Code: _____
5. Fax : _____ E-Mail : _____
6. GST Registration No. : _____
7. Business Activity / Services Offered: _____
8. Name of Designated Representatives for Chamber's Activity
1. _____
2. _____
9. Are you aware about CTC activities and programmes? _____
10. Whether applicant or any professional in your Organisation subscribes to CTC's The Chambers Journal Review?

DETAILS OF REPRESENTATIVES OF ASSOCIATE

Designated Representative –1:

_____ (Surname)
_____ (Name) (Father's / Husband's Name)

Designation (Current Position): _____ Qualification: _____

Telephone No : _____ Mobile: _____

Email ID Office / Personal: _____

Designated Representative – 2:

_____ (Surname) _____ (Name) (Father's / Husband's Name)

Designation (Current Position): _____ Qualification: _____

Telephone No.: _____ Mobile: _____

Email ID Office / Personal: _____

We are enclosing herewith cheque by cheque /draft No.
_____ dated _____ drawn on as ` _____.

We agree to abide by the Rules and Regulation of the Chamber.

Yours faithfully,

(To be signed by the Authorised Representative)

Company Stamp

Proposed by	Seconded by
Name :	Name :
Signature :	Signature :

FOR OFFICE USE ONLY

Issued Acknowledgment Slip No. _____ Dated _____ Accepted by the Managing
Council in the Meeting held on _____ Issued Receipt No. _____ Dated _____ For Rs _____
Database Entry Date _____

NOTES

- ☐ Please write / type in capital letters.
- Cheques/DD should be drawn in favour of "The Chamber of Tax Consultants"
- ☐ Outstation remittance should be by Demand Draft/at Par Cheque payable at Mumbai only.
- ☐ The form should be completed in all respects.
- ☐ The membership application is subject to acceptance by the Managing Council of Chamber