

## MEMBERSHIP APPLICATION FORM



### ASSOCIATION OF WOMEN ENTREPRENEURS OF KARNATAKA

B-76, KSSIDC Industrial Estate, Rajajinagar, Bangalore-560 010. INDIA

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An ISO 9001-2000 Certified Organisation

#### (A) PERSONAL DATA

1. Name (in block letters) : .....
2. Residential Address : .....  
.....  
Ph : (R) .....
3. Educational Qualification : .....
4. Date of Birth : .....
5. Father/Husband's Name : ..... Profession.....
6. Training in Business Management/Experience (Mention Year, Agency etc.,) : .....
7. Awards / Recognitions if any : .....
8. Are you a member of any other Organisation ? : .....
9. If there is any published write-up about you, please enclose a copy.

#### (B) BUSINESS

1. Name of the Business : .....
2. Address of the Business Firm : .....  
.....  
Ph : (O): ..... (F): ..... (M): .....
- E-mail : ..... Website : .....
3. Constitution : Proprietrix  Partnership   
Please[✓] the right box Private Limited  Public Limited
4. Year of Establishment :

5. Designation : Proprietrix /Managing Partner/Managing Director/Others
6. Please provide the Business Registration Details as applicable (enclose Photocopy of the document) : TIN / CST / MSME Reg. No. / Service Tax / Shops & Establishments / Others
7. Are you an Income Tax Payee : Yes / No If yes PAN No. :.....
8. Type of Business : Manufacturing / Trading / Services
9. Product Details (with Photograph) : .....
10. Are you in Exports : Yes  No  Exporting since
11. Bankers : .....
12. Have you availed Loan from Bank / Others : Yes  No
13. Capital Investment in Business : .....Total Turnover.....
14. No. of Employees : .....
15. Any other Relevant Information : .....
16. Address for Communication Resi.:  Office :
17. Membership Category : Life  Regular  Renewal  Membership No.....

I/We hereby desire to apply for Membership of AWAKE, Bangalore & have enclosed Cash / Cheque / Draft No.....dt..... drawn on..... for Rs..... (in words) ..... for the Financial Year 20\_\_ to 20\_\_ (April to March).

Date :.....

Company Seal

Signature of the Applicant

Please note : Your Membership Application will be valid only after approval by the Executive Committee

**FOR OFFICE USE ONLY**

Date of Receipt : ..... Verified by : ..... Membership No.....

Approved by E.C. on : .....

President / Hon. Executive Secretary