



INTACH

PLEASE READ THE INSTRUCTIONS CAREFULLY ON THE REVERSE

BEFORE FILLING THE FORM

Indian National Trust For Art & Cultural Heritage
71, Lodhi Estate, New Delhi - 110 003
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Website : www.intach.org; E-mail: intach@del3.vsnl.net.in

For Office Use
Received on:
Enrolled on :
Membership No.
Category :
Receipt No:
Valid up to:

To
INTACH Chapter Division

I hereby apply for being enrolled as a Member of INTACH in my individual capacity / on behalf of
(name of Corporate Body/Institution).

I have read the Memorandum of Association and the Rules & Regulations and agree to abide by them and to pay the Admission Fee/Annual Subscription as fixed from time to time. I understand that the decision of INTACH regarding my application for membership will be final. I am hereby submitting Cheque / DD No. dated drawn on in favour of INTACH Chapter Membership for Rs.

Date : Signature of Applicant
Proposer's Name : Membership No. Category

Date : Signatory of Proposer
Chapter's Name Convenor's Recommendation Yes No

Date : Convenor's Name Signature

Category of Membership Applied for (Tick One)

Donor Corporate Institutional Life

Particulars of the Applicant

Name of applicant: Mr./Ms.

*Nationality: *Sex: M F *Date of Birth: DD MM YYYY

Address:

City :

Pin : State :

Telephone Off.: Code :

Res.: Code :

Fax : E-mail (if any):

Mob.:

Affix here Photograph of Applicant (only in case of Life Membership) / Individual Donors

In the case of Institutional / Corporate / Donor
Name of Organisation :
Registration No. Date :
(Please enclose copy of Registration Certificate, Memorandum of Association/Articles of Association, Annual Report/Accounts)

Send two stamp size photograph for Photo Identity Card.

*Educational Qualifications :

*Profession :

*Membership of Academic/Professional Organizations (if any):

In what way you can help INTACH:

(Separate sheet can be used in case of more information)

(*To be filled in the case of individual members only)

Information about Membership

Following categories of membership are available in INTACH for individuals/Institutions/corporate bodies who are interested or concerned in preservation of the cultural & natural heritage of the country and who subscribe to INTACH's objectives.

Corporate: Any Public or private sector corporation.

Donor: Any Government or Government Organisation / Authority / Body.

Individual Donor: Open to all individuals.

Institutional: Any academic or cultural body duly registered as a Society / Trust, including a University Department for 10 years

Life : Open to all individuals.

Note : The category of Ordinary membership is not available directly. Only Associate Member may, on application be elevated to this category as per rules.

Details of Fee Structure

Category of Members	Admission Fee (Rs.)	Annual Subscription (Rs.)
Donor		
(i) Individual Donor	2,00,000	---
(ii) Any Govt. or Govt. Organisation/Authority/Body	10,00,000	---
Corporate		
Public or Private Sector Corporation	10,00,000	---
Institutional (New)	10,000 (for 10 years)	---
Institutional (Existing)	---	500
Life	5,000	---
Ordinary (Existing)	---	200

General Information

- For Computerization purposes, form must be filled in capital letters. Incomplete form is liable to be rejected.
- The application must be recommended & signed by an existing voting member of INTACH namely Founder / Corporate/ Donor/Institutional/Life/Ordinary.
- Membership application for categories like Life, Associate & student should preferably be sent through concerned Chapter. However in case it is received at the Central Office, the application will be forwarded to concerned Chapter Convenor for recommendation.
- The application for other categories can be submitted to the Central Office.
- Membership applications in all categories have to be finally approved by the Membership Committee at INTACH's Central Office, New Delhi.
- As per Rule 18(i) of the Rules & Regulations of INTACH, the Executive Committee has the right to refuse membership without assigning reasons. The decision of the Committee shall be final.

Applicants should furnish 2 specimen signatures as below :

1. _____

2. _____

For Office Use

Change of address if any intimated by member on date _____

Name: _____

Address : _____

Phone : _____ Fax : _____

E-mail : _____