

TAXATION CONSULTANTS' ASSOCIATION, SANGLI

Krishna-Kunj Aptt, Opposite Engineers & Architects Association,
Gulmohor Colony, Sangli - 416416

Please affix Your
recent passport size
photograph

MEMBERSHIP APPLICATION FORM

To,
The President
Taxation Consultants' Association, Sangli

Date :

Dear Sir,

Being eligible to practice under taxation Laws, I hereby apply for admission as a life member of the Taxation Consultants' Association Sangli with the following particulars:

PERSONAL DETAILS

i. Full Name : (Block Letters) (Start with Surname)

ii. Office Address:

iii. Residence Address:

iv. Communication Nos. (STD Code)

Office: Tel Nos. () _____

Office: Fax Nos. () _____

Mobile Nos. : _____

Resi : Tel Nos. () _____

Email id :

v. Birth Date :

D	D	-	M	M	-	Y	Y	Y	Y

EDUCATION QUALIFICATION

vi. Graduate Level:

B.Com B.Sc. B.A. Any Other _____

viii. Professional Level :

I.T.P. S.T.P. Adv . C.A. I.C.W.A. C.S.

Any Other (Please specify) _____

- ix. **Date of Starting practice**
- x. Membership / Roll / Enrollment No. issued by respective Institute: _____
(Please enclose Photocopy/copies as the proof of the above) i.e. Certificate of Practice / STP / ITP / Enrollment /copy of Bar Council Sanad etc)

OTHER DETAILS

- i. Marriage Date: _____
- ii. Name of the Spouse: _____
- iii. Qualification of the Spouse: _____
- iv. My Blood Group **A** ☐ **B** ☐ **AB** ☐ **O** ☐ **RH+ve** ☐ **RH-ve** ☐

DETAILS OF PAYMENT

Enclosed herewith please find a Cheque / DD / Case of Rs. _____ (Rupees _____
_____) Vide Ch. No _____ date _____
drawn on _____ Bank, _____ Branch, for the
following:

Membership Fee Rs: _____

Admission Fee Rs: _____

Others (Pl specify) Rs: _____

Total Rs: _____

Notes: 1) Cheque / Draft should be drawn in favour of “Taxation Consultants’ Association, Sangli”
2) Outstation payments only by Demand draft payable at Sangli

INTRODUCED BY (Start with Surname)

(Name of the introducing TCA Member)

Membership No. _____

Signature of the introducing member

VERIFICATION BY APPLICANT

I, _____ do hereby declare that whatever
stated hereinabove is true to the best of my knowledge and belief. I also undertake to abide by the
Rules, Regulations and Constitution of the Association, as amended from time to time.

Thanking you,
Yours faithfully

Name and signature of the applicant

Encl. 1. Cash / Cheque / Draft as above
2. Photocopy of Certificate of professional
practice

For Office Use Only		
Receipt No	Amt / Date	Membership No
Accepted by the Managing Committee in the Meeting held on		
Date :	Signature	