

Scientific & Surgical Dealers & Manufacturers Association

5/6, Old Sitaram Building, 204, Princess Street, Mumbai - 400 002.
Tel.: 2206 7665, 2201 7040, 2201 1922
E-mail: sidma.association@gmail.com • Website: www.sidma.in



APPLICATION FOR MEMBERSHIP

Life Membership : _____

Name of Firm / Individual _____

Nature of business : Dealer / Manufacturer / Impoter

Nature of Products : scientific / Surgical / Glassware / Misc

Full Address : _____

Telephone No. : _____ Mobile No. : _____ Fax No. : _____

Email : _____

Name of Proprietor / Partner / Director / Office Bearers	Mobile No.
_____	_____
_____	_____
_____	_____

I/We Hereby Declare that the Above Information is correct to the best of my / our Knowledge and Belief and that I/we have read the Rules and Regulations of the Association and Undertake to Abide by them.

A Cheque for Rs. 5100/- To-Wards Life Membership fees

(Please Attach a Visiting Card of your Company)

Recommendation by Two Members (At Least One Life Member) of the Association.

The applicant is Recommended to be Enrolled as a Member of Association.

SIGNATURE

Signature : _____

Signature : _____

Company Name : _____

Company Name : _____

Name : _____

Name : _____

Date : _____

Date : _____

For Office Use Only

Received On

Accepted by Managing Committee on

President

Hon. Secretary

Date :