



Affix
Applicant's
Photograph

Headquarters:
K-43 (Basement), Kailash Colony, New Delhi 110048
Tel: +91 11 41635655/ 29234925
Email: membership@ishraehq.in Website: www.ishrae.in

Service Tax No.: AAATI0241HSD001

Name of Chapter/Sub-Chapter _____

Town / City _____

Membership Application for Full Member Associate Member Affiliate Member

Name Mr./Ms./Mrs./Dr. _____
(First) (Middle) (Surname)

Date of Birth ____/____/____ Preferred Postal Address for Deliveries Business Home
dd/mm/yy

Email ID _____ Alternate Email _____

Business Address _____

_____ Tel. Landline with STD _____

_____ PIN code _____ Tel. Mobile _____

Home Address _____ Tel. Landline with STD _____

_____ PIN code _____

Online Address (e.g. Skype/Facebook/Linked-In/Twitter/Any Other) _____

Education

<u>Course Attended</u>	<u>University / Institute</u>	<u>City . / Country</u>	<u>Year</u>	
			<u>From</u>	<u>To</u>
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

Employment

<u>Period (From / To)</u>	<u>Company Name</u>	<u>Position held</u>	<u>Responsibility</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____



Technical areas of interest

(Use following codes to indicate choice)

- | | | |
|---------------------------------|--|------------------------------|
| 01 Indoor Air Quality | 06 Air Cond. Equipment Under 15 TR | 11 Clean Room |
| 02 Energy Recover Services | 07 Air Cond. Equipment Under 15-200 TR | 12 Pipe, Valve & Fittings |
| 03 Air Cleaning & Odour Control | 08 Air Cond. Equipment above 200 TR | 13 Sound & Vibration Control |
| 04 Industrial Ventilation | 09 Unitary Refrigeration System | 14 Control & Instrumentation |
| 05 Evaporative Air Cooling | 10 Industrial Refrigeration System | 15 Other (Please Specify) |

First

Second

Third

Papers published:

Yes

No

If yes, topic and area of subject _____

Reference (Preferably by ISHRAE member)

I know the applicant by _____ (personal/business) association for approximately _____ years. To the best of my knowledge, the above information is correct and as such I recommend the applicant for ISHRAE membership.

Additional comments: _____

Reference Name /Address: _____

Membership Number: _____

Date: _____

Signature: _____

Membership Fee

Full Member / Associate Member / Affiliate Member

(For 3 Years)

(For 10 Years)

Registration Charges	₹ 1500/-	₹ 1500/-
Membership Charges	₹ 3000/- (for 3 years @ 1000)	₹ 7500/-
Total	₹ 4500+S.T @ 15%= 5176	₹ 9000+S.T @ 15%=10350

The Cheque/Demand Draft should be in favour of "ISHRAE HEADQUARTERS" payable at New Delhi.

You can also Join online by visiting on www.ishrae.in and can make payment through Debit/Credit Card or Net Banking

Payment Details

Cheque/Draft Number: _____ Amount: _____ Drawn on _____ Dated: _____

CERTIFICATE BY APPLICANT

I hereby certify that the information provided above is true and correct to the best of my knowledge and if admitted, I will abide by the constitution and the rules & regulations of ISHRAE.

Date: _____

Applicant's Signature: _____

For Office Use:

Admit Reject

Membership Grade _____ Membership # _____