



Confederation of Indian Industry

CII's Indian Women Network (IWN) Membership Form for Corporate

Dear Madam,

I / We wish to apply / nominate ----- official(s) to the IWN membership. The duly completed application form is submitted along with relevant documents.

I/ We hereby declare that the mentioned particulars are true to the best of my / our knowledge and belief. Kindly acknowledge receipt of the above and confirm membership.

Yours faithfully

Signature:

Date

Please fill the form in **BLOCK** letters

Name:

Designation:

Organisation:

Address:

.....

Contact number:.....Email:.....

Paste your photograph

Details of the single point of contact for IWN from the Company

Name:

Designation:

Organisation:

Address:

.....

Contact number:.....Email:.....

Paste your photograph

(Note: All communications related to IWN activities and membership related information will be informed to the IWN contact person.)

About your Organisation

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Enclosed is the Cheque / Demand Draft No.....
Dated.....
for Rs drawn
on in favour of Confederation of Indian
Industry, payable at par.

- Encl:
- 1. Cheque / Demand Draft
 - 2. Brief profile of the nominees(s)
 - 3. Note on your expectations from IWN

We hereby give our consent to abide by the Rules and Regulations of IWN.

Signature:..... Name:.....

Date:..... Designation:.....

For IWN Office Use Only

Approval Date.....

APPLICABLE MEMBERSHIP FEE

Corporate Members Rs 3000 + 14.5% ST = Rs 3425 per
member/per annum

DISCOUNT FOR GROUP NOMINATIONS

IWN Corporate Chapter will be initiated with a minimum nomination of 50 members to IWN.

- For 10 to 100 nominations 5% Discount on the total fee

- For 101 and above nominations 10% Discount on the total fee